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

OMB No 1545-0052

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OS THE PUPPOR TO MA	ne c					_	of a former p	oublic cha r	<u> </u>		<u> </u>	Ja.	return
NEW BOLD	ne c	f farradation	Amended	return		Addres	s change			lame change			
SE PU PO CITY		of foundation								A Employer	ientino	cation nu	mber
80 city		TRIANGLE FUN	מו								31-	15912	261
80 City	_	r and street (or P O t		nt delivered	to street address	:e1		Room/su	ute	B Telephone n			
City	<u>.</u>			or delivered	to succe addica	13)		1100111130		D Telephone ii	uc. (see page 1	0 01 010 1100 0000
City	E.	AST MARKET S	TREET					202			(60	7) 96	52-0189
		town, state, and ZIP				· · · · · · · · ·		l		C If exemption	applicat	tion is	▶
										pending, che D 1 Foreign of			here ►
	RN	ING, NY 1483	30							2 Foreign o	_		
	<u>C</u> he	ck type of organiz	ation: X Secti	on 501(c)(3) exemp	t private f	oundation					ere and atta	
	s	Section 4947(a)(1) n	onexempt charitable				vate founda	tion		E If private fou			
٠ ١	Fair	market value of a	ll assets at end		unting metho		ash Acc	crual		under sectio			_ 1
	_	ear (from Part II, co		Ot	her (specify)					F If the found	ation is	ın a 60-mor	nth termination
		<u> </u>	310,768.		column (d) n	nust be on	cash basis.)			under section	1 507(b)		
Ρā	:lit	Analysis of Rev	enue and Expens columns (b), (c), and	es (The d	(a) Reven		(b) Net inve	estment	(c) Adjusted no	et		isbursement: · charitable
		may not necessari	ly equal the amounts	sin´	expense book		incom	ne	·	income		F	ourposes
Т	4		ge 11 of the instruct	- ' -		9,313.						(cas	h basis only)
	1 2		foundation is not requ	ured to		,			-				
	3	Interest on savings an	h Sch B						_				
	4	Dividends and inter	· -		7	2,146.	7	2,146.				ATC	CH 1
	-	Gross rents		[* .					*			
		Net rental income or (
		Net gain or (loss) from		line 10	7	1,251.							
	b	Gross sales price for a assets on line 6a	168	<u>,611</u> .									
	7	Capital gain net ind	ome (from Part IV, !	ine 2) .			7	1,251.					
	8	Net short-term cap	•	Г					5	ECENT	Ē		
	9	Income modificatio Gross sales less return					<u>. </u>		K	EULIV	<u> </u>	70	
Ι.		and allowances · · ·	• •					- 2				080-	
		Less Cost of goods so	-					17		HAY 172	911	12	
	с 1	Gross profit or (loss Other income (attac						<u> w</u>					
- 1		Total. Add lines 1 t			46	2,710.	14	3,397.	n	G)FN.	Ü		
Т	3	Compensation of office		Ī		0.		- L					
1	14	Other employee sa		• • •	2	7,108.							20,3
1	5	Pension plans, emp											
1	6a	Legal fees (attach s											
		Accounting fees (a			2	0,000.	2	0,000.			0.		
	c	Other professional	fees (attach schedul	e)									
1	7	Interest		لد بد		2 457		057					
1	8	Taxes (attach schedule	, , , ,	·		2,457		957.					
1	9	Depreciation (attac	,	·		544.							-
2	20	Occupancy		í	, , , , , , , , , , , , , , , , , , ,	6,048.	· · · · · · · · · · · · · · · · · · ·						
: 1	21	Travel, conferences		1		528.							
	22	Other expanses (et				5,774.							
2	23 24	Other expenses (at		I		-,,,					-		
2	.4	Total operating an Add lines 13 through			6	3,146	2	0,957.			0.		21,0
	25	Contributions, gifts				9,900.		•					169,9
1	:5	Total expenses and disbr		- 1		3,046.	2	0,957.			0.		190,9
	7	Subtract line 26 fro		. 31,4 20									
		Excess of revenue over e		nts	22	9,664.							
		Net investment inc	•	· · · ·			12	2,440.					
\perp		Adjusted net incon	· -	· · · · · ·						* ATCH			

Ð	art II	Ralanca Shoots	Attached schedules and amounts in the description column should be for end-of-yea	Beginning of year		End o	of year
ک	:1141	Paralice Slicers	amounts only (See instructions)	(a) Book Value	(b) Book Value	϶	(c) Fair Market Value
	1	Cash - non-interest-beari	ing				
١			cash investments				
-		Accounts receivable ▶					
			btful accounts ▶				
	4	Least ellewence for deal	La Caracita N	-			
			btful accounts ▶				
-					_		
- 1	6	Receivables due from	officers, directors, trustees, and othe	Г			
			sch schedule) (see page 15 of the instructions	-			
	7	Other notes and loans r	receivable (attach schedule) 🕨	_			
ĺ		Less. allowance for dou	btful accounts ▶				
S	8	Inventones for sale or us	e	,			
Assets			eferred charges				
As	10 a	Investments - U S and stat	e government obligations (attach schedule)				
			stock (attach schedule) ATCH 5		45. 57,	245.	400,639.
		•	bonds (attach schedule)				
	11	Investments - land, building:	s, >	İ			
		and equipment basis Less accumulated deprecia	ation	-			
	4.0	(attach schedule)	loans	-			
- 1	12 13	Investments - mongage	ach schedule) ATCH 6	2,733,1	96. 2,940,	619.	3,410,129.
	14	Land, buildings, and	2,172.	. 27,0072	2,010,	0231	ATCH 7
		equipment basis	ation - 1 1/17	1,2	60	725.	1
			1,447		09.	123.	
							<u></u>
	16	•	completed by all filers - see the	9 701 7	10 0 000	F 0 0	2 010 760
4			age 1, item I)		2,998,	589.	3,810,768.
	17	Accounts payable and a	accrued expenses				
	18	Grants payable					
S	19 20 21 22						
	20		ors, trustees, and other disqualified persons	l l			
ä	21	Mortgages and other no	otes payable (attach schedule)				
	22		e ▶				
		•					
	23	Total liabilities (add line	es 17 through 22)	,		0.	
\exists			low SFAS 117, check here ▶				
		and complete lines	24 through 26 and lines 30 and 31]. -			
S		Manager at a d					
힏	24	Unrestricted		•			
ᇛ	25	remporarily restricted		i			
0	26	Permanently restricted	not follow SFAS 117, uplete lines 27 through 31.	·			{
틝		Foundations that do	not follow SFAS 117,	٦١			
딘		check here and com	plete lines 27 through 31. $\blacktriangleright X$		10 2 000	E00	
ō	27	Capital stock, trust prin-	cipal, or current funds	2,791,7	2,998,	569.	
ets	28 29 30	Paid-in or capital surplus, or	r land, bldg, and equipment fund	•			
SS	29	Retained earnings, accumi	ulated income, endowment, or other funds .	•	0.		
۲	30	Total net assets or t	fund balances (see page 17 of the				
ž		instructions)		2,791,7	10. 2,998,	589.	
- 1	31	Total liabilities and ne	t assets/fund balances (see page 1)	7			
		of the instructions)	<u> </u>	2,791,7	2,998,	589.	
Р	ar <u>t ll</u>		anges in Net Assets or Fund				
_			palances at beginning of year - Pa		30 (must agree with		
-			d on prior year's return)	• •		1 1	2,791,710.
2			line 27a			2	229,664.
- 2	Othe	r increases not includ	ad l.n.a 2 (dansa) >			3	
						-	3,021,374.
4 -	Auu I	lines 1, 2, and 3	line 2 (itemize) ▶ ATTAC	UMENT O		4	22,785
						5	2,998,589.
6	rotal	net assets or fund ba	alances at end of year (line 4 minu	s iine 5) - Part II, colur	nn (b), line 30	6	2,990,309.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List an 2-story b	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr.)	(d) Date sold (mo , day, yr)					
1a SEE PART IV SCHI	EDULE							
b								
С								
<u>d</u>	<u> </u>		<u> </u>					
<u>e</u>								
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini				
<u>a</u>								
<u>b</u>								
<u>c</u>								
<u>d</u>								
<u>e</u>								
Complete only for assets	showing gain in column (h) and owne			Gains (Col (h) g				
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	(k), but not less to Losses (from co				
_a								
_ b								
<u>c</u>								
<u>d</u>								
<u>e</u>			 		··- - ··			
2 Capital gain net income or		gain, also enter in Part I, line 7			71 051			
-	(11	(loss), enter -0- in Part I, line 7	2		71,251.			
	n or (loss) as defined in sections 12							
	, line 8, column (c) (see pages 13							
If (loss), enter -0- in Part I,	line 8		3					
	Under Section 4940(e) for Rec c private foundations subject to the				- -			
	the section 4942 tax on the distribution to qualify under section 4940(e)	• •	ase period	d?	Yes X No			
1 Enter the appropriate am	ount in each column for each year	; see page 18 of the instructions be	efore mak	ing any entries.				
(a) Base penod years	(b)	(c)		(d) Distribution re	atio			
Catendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		(col (b) divided by				
2009	197,536.	2,882,375.	ļ		0.068532			
2008	189,862.	3,494,484. 3,903,743.	ļ		0.054332			
2007	188,912.	·	ļ		0.048393			
2006	185,630. 151,050.	3,534,176. 1,812,533.			0.052524			
2005	131,030.	1,612,533.	-		0.083336			
0 Takal of has 4 (1					0.307117			
2 Total of line 1, column (d)	the detail and been Ober 5. and building	2		0.30/11/			
_	for the 5-year base period - divide dation has been in existence if less		3		0.061423			
4 Enter the net value of nor	ncharitable-use assets for 2010 fro	m Part X, line 5	4	3,	330,107.			
5 Multiply line 4 by line 3			5		204,545.			
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		1,224.			
			7		205,769.			
8 Enter qualifying distribution	Add lines 5 and 6. 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. See the							
Part VI instructions on page		, ,	F	<u> </u>				

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of t	ne ins	tructio	ons)			
1 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 ruling letter if necessary - see instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		2,4	49.			
	here and enter 1% of Part I, line 27b						
С	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			49.			
3 Add lines 1 and 2							
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		2,4	49.			
6	Credits/Payments						
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 1,814.						
b	Exempt foreign organizations-tax withheld at source						
С	Tax paid with application for extension of time to file (Form 8868) 6c 0.						
d	Backup withholding erroneously withheld						
7	Total credits and payments Add lines 6a through 6d		1,8	14.			
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		6	35.			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid						
11	Enter the amount of line 10 to be Credited to 2011 estimated tax						
	t VII-A Statements Regarding Activities	1					
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	4 -	Yes	No X			
	participate or intervene in any political campaign?	1 a					
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	4.		х			
	of the instructions for definition)?	1 b					
	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 c		х			
C 	c Did the foundation file Form 1120-POL for this year?						
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation (2) On foundation managers \$\Bigsim \frac{1}{2} = \frac{1}{						
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed						
•	on foundation managers >\$						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х			
_	If "Yes," attach a detailed description of the activities						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of						
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		<u> </u>			
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 legislation that effectively amends the governing instrument so that no mandatory directions that						
	conflict with the state 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? If "Yes," complete Part II, col. (c), and Part XV	7					
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the						
	instructions) > NY,						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		х				
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Λ				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		ŀ				
	4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page	<u> </u>		х			
4.6	27)? If "Yes," complete Part XIV	9					
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses. ATTACHMENT 9	10	х				

	t VII-A Statements Regarding Activities (continued)			
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
• •	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		X
13	· · ·	_13	X	
	Wohelto address N/A			
14	The books are in care of ► MARIANNE W. YOUNG Located at ►80 EAST MARKET STREET CORNING, NY ZIP+4 ► 14830	2-68	76	
	Located at ▶80 EAST MARKET STREET CORNING, NY ZIP+4 ▶ 14830		- -	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, secunties, or other financial account in a foreign country?	16		
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter			
	the name of the foreign country	<u> </u>		
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	ļ	Yes	No_
1 a	During the year did the foundation (either directly or indirectly)	1		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Turnish goods, services, or racinites to (or accept their from) a disqualined person?			
	(4) Fay compensation to, or pay or reimburse the expenses of, a disqualmed person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	the benefit of use of a disqualined person)/			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, it terminating within 90 days)			
D	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1ь	1	х
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	"		
_	Organizations relying on a current notice regarding disaster assistance check here			
C	were not corrected before the first day of the tax year beginning in 2010?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2010?		-	
	If "Yes," list the years			
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	-		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see page 22 of the instructions)	2b		X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			:
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2010)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		_ <u>X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4 b		<u>X</u>

Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions).

(b) Title, and average

hours per week devoted to position

(c) Compensation

-		-		<u>-</u>	_ I _			
Fo	òπ	n	9	90)-P	۲F	(20	10)

(e) Expense account.

If none, enter "NONE."

NONE

(a) Name and address of each employee paid more than \$50,000

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

(d) Contributions to

employee benefit plans and deferred

compensation

Par	t VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emplo and Contractors (continued)	yees,
3	Five hi	ghest-paid independent contractors for professional services (see page 23 of the instructions). If n	one, enter "NONE."
		(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
	NONE		
Tota	l numbe	er of others receiving over \$50,000 for professional services	NONE
Par	t IX-A	Summary of Direct Charitable Activities	
		dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1	NOT P	PPLICABLE	
-			
_			
2			
-			
-			
3			-
-			
-			
4			
_			
_			
Par	t IX-B	Summary of Program-Related Investments (see page 24 of the instructions)	
Des	cribe the	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	NOT P	PPLICABLE	
2			
All	other prog	ram-related investments. See page 24 of the instructions	
3 _	NONE		
_			

Form 990-PF (2010)

Pa	Minimum Investment Return (All domestic foundations must complete this part. Forei see page 24 of the instructions.)	gn found	lations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	ригроses		
а	Average monthly fair market value of securities	1a	3,179,603.
b	Average of monthly cash balances	1b	201,216.
C	Fair market value of all other assets (see page 25 of the instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	3,380,819.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation)	1	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,380,819.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25 of	-	
•		4	50,712.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,330,107.
6	Minimum investment return. Enter 5% of line 5	6	166,505.
	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) priva	-	
	foundations and certain foreign organizations check here	ne operati part.)	119
1	Minimum investment return from Part X, line 6	1	166,505.
	Tax on investment income for 2010 from Part VI, line 5 2a 2,449.		200,0001
b	Income tax for 2010 (This does not include the tax from Part VI.)	1	
C		2c	2,449.
3	Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1		164,056.
4	Recoveries of amounts treated as qualifying distributions		1017030.
5		5	164,056.
6	Add lines 3 and 4 Deduction from distributable amount (see page 25 of the instructions)	6	104,050.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	-	
'		,	164,056.
_	<u>line 1 </u>	7	104,030.
Pa	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	190,918.
b	Program-related investments - total from Part IX-B	1 b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	190,918.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	190,918.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when cal qualifies for the section 4940(e) reduction of tax in those years.	culating	

Form 990-PF (2010)

Pa	Part XIII Undistributed Income (see page 26 of the instructions)									
		(a)	(b)	(c)	(d)					
1	Distributable amount for 2010 from Part XI,	Corpus	Years prior to 2009	2009	2010					
	line 7				164,056.					
2	Undistributed income, if any, as of the end of 2010									
а	Enter amount for 2009 only									
b	Total for pnor years 20 08 ,20 07 ,20 06									
3	Excess distributions carryover, if any, to 2010									
а	From 2005 61, 288.									
	From 2006 12, 288.									
	From 2007 66.									
d	From 2008 19,244.									
е	From 2009 54,094.									
	Total of lines 3a through e	146,980.								
4	Qualifying distributions for 2010 from Part XII,									
-	line 4 ▶ \$ 190,918.				•					
а	Applied to 2009, but not more than line 2a									
b	Applied to undistributed income of prior years (Election									
	required - see page 26 of the instructions)									
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)									
d	Applied to 2010 distributable amount				164,056.					
	Remaining amount distributed out of corpus	26,862.								
5	Excess distributions carryover applied to 2010		·							
	(If an amount appears in column (d), the same									
6	amount must be shown in column (a)) Enter the net total of each column as									
	indicated below:									
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	173,842.								
b	Prior years' undistributed income Subtract									
	line 4b from line 2b									
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been									
	issued, or on which the section 4942(a) tax has									
	been previously assessed									
d	Subtract line 6c from line 6b Taxable									
۵	amount - see page 27 of the instructions Undistributed income for 2009 Subtract line				-					
·	4a from line 2a Taxable amount - see page									
	27 of the instructions				-					
f	Undistributed income for 2010 Subtract lines									
	4d and 5 from line 1 This amount must be distributed in 2011									
7	Amounts treated as distributions out of corpus									
-	to satisfy requirements imposed by section									
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the									
8	instructions)				<u> </u>					
	applied on line 5 or line 7 (see page 27 of the	61,288.								
9	Instructions)									
-	Subtract lines 7 and 8 from line 6a	112,554.								
10	Analysis of line 9									
	Excess from 2006									
	Excess from 2007 66.									
	Excess from 2008 19,244.	1								
d	Excess from 2009 54,094.									
е	Excess from 2010 26,862.									

	rt XIV Private Oper	rating Foundations /	see page 27 of the	instructions and Par	t VIII-A guestion 9)	NOT APPLICAB
						IIII BIOND
ιа	If the foundation has					
	foundation, and the ruling					1/2) 1 40.40/./5)
b	Check box to indicate wh		private operating round		1 4942(ı)(3) or 4942(ı)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part	(a) 2010	(b) 2009	(c) 2008	(d) 2007	ļ
	or the minimum investment return from Part X for each year listed					
					<u> </u>	
D	85% of line 2a			-		
С	Qualifying distributions from Part					
	XII, line 4 for each year listed .					ļ. — — —
đ	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made					
	directly for active conduct of exempt activities. Subtract line					
_	2d from line 2c					<u> </u>
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section					
_	4942(j)(3)(B)(i)	-				<u> </u>
D	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X,					
	line 6 for each year listed					
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)	·				-
	(3) Largest amount of sup- port from an exempt					
	organization					
	(4) Gross investment income			and if the found	-4: b-d 65 000	
Рa		ary information (C during the year - se		only if the foundanstructions.)	ation nad \$5,000	or more in asset
1	Information Regardin	g Foundation Manage	rs:			-
а	List any managers of before the close of any			re than 2% of the tota more than \$5,000) (Se		
	GRATIA LA	SSALLE, NINA B	HOUGHTON, JAM	ES D HOUGHTON,		
b	List any managers of					y large portion of the
	ownership of a partner	rship or other entity) of	which the foundatio	n has a 10% or greater	interest.	
	N/A					
2	Information Regardin	g Contribution, Grant	, Gift, Loan, Scholars	hip, etc., Programs:		
	Check here ▶ If t	he foundation only r	makes contributions	to preselected charit	able organizations a	and does not accept
				grants, etc (see page		
	organizations under ot	her conditions, comple	ete items 2a, b, c, and	l d		
	The name, address, a	nd telephone number	of the nerson to who	m applications should be	e addressed:	
-	ATTACHMI		or the person to who	m applications should be	o dadroocod.	
	The form in which app	*****	omitted and informati	on and materials thev	should include.	
					-	
	REQUEST FO	· · · · · · · · · · · · · · · · · · ·				
С	Any submission deadli	nes:				
	JUNE 30					
d	Any restrictions or li	mitations on awards,	such as by geogr	aphical areas, charital	ble fields, kinds of	institutions, or other
	factors	TIONS FYTST				

3 Grants and Contributions Paid Dur Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient		
Name and address (home or business)	any foundation manager	I status of		1 4
		recipient	Purpose of grant or contribution	Amount
a Paid during the year				
a Paid during the year ATTACHMENT 12		recipient		
Total			▶ 3a	169,900
b Approved for future payment				
Total			▶ 3b	

Part XVI	-A Analysis of Income-Produ	cing Activ	vities			
	amounts unless otherwise indicated.		ated business income	Excluded by	y section 512, 513, or 514	(e)
1 Program	n service revenue.	(a) Business code	(b) Amount	(c) Exclusion code	(d)	Related or exempt function income (See page 28 of the instructions)
_						and modulons)
		-				
					_	
f						
g Fees	and contracts from government agencies					
	rship dues and assessments					
	on savings and temporary cash investments					
4 Dividend	ds and interest from securities			14	72,146.	·
	tal income or (loss) from real estate					
a Debt	-financed property					
	debt-financed property					
6 Net renta	al income or (loss) from personal property .					
7 Other in	ivestment income					
8 Gain or (loss) from sales of assets other than inventory			18	71,251.	
9 Net inco	ome or (loss) from special events			ļ <u>.</u>		
10 Gross p	rofit or (loss) from sales of inventory					
11 Other re						
	NTAXABLE DISTRIBUTION	_			=:= :	
c FEL	DERAL TAX REFUND					
d	· · · · · · · · · · · · · · · · · · ·	-			-	
θ					142 207	
	I Add columns (b), (d), and (e)			<u> </u>	143,397.	
	dd line 12, columns (b), (d), and (e)				¹³	143,397.
Part XVI-	heet in line 13 instructions on page 29 Belationship of Activities			omnt Burn	0000	
	· · · · · · · · · · · · · · · · · · ·		· '-			
Line No.	Explain below how each activit accomplishment of the foundation					
lacktriangledown	instructions)	0110 0201112	at purposes (other than	by providing	g rands for sacir parpose	o). (Occ page 20 of the
	·					
		_				
			•			
		· · · · ·				
				·		
			<u> </u>			
	1					

Par	t XVII	Information Exempt Orga		ansfers To and	Transactio	ons and Re	lationships With N	onchari	table
1	ın seci	tion 501(c) of the Coations?	ode (other than	section 501(c)(3) orga	anizations) o	· ·	organization described 7, relating to political	Yes	No
а				chantable exempt organi				la(1)	X
							<u> </u>	la(2)	X
b		ransactions.						15/1)	x
									X
									X
									X
									X
								1Ь(6)	X
								1c	<u> X</u>
d							b) should always show		
		=					oundation received less to oods, other assets, or s		
(a) L	ine no	(b) Amount involved		ncharitable exempt organiz	1		ransfers, transactions, and sharir		
		N/A			l	N/A		•	
			_	·····					
				.					
				-					
			_						
	+		-						
			_						
						-			-
		_							
	describ		the Code (other tha	liated with, or relate an section 501(c)(3)) or			tempt organizations	Yes	X _{No}
	II TES	(a) Name of organization		(b) Type of orga	nization		(c) Description of relationsh	ııp	
							•		
									
									
Sig	n belie	er penalties of perjury, I def, it is true correct, and cor	eclare that I have ex nplete Declaration of	amined this return, including preparer (other than taxparer)	ver or fiduciary)	ring schedules and) is based on all info	statements, and to the best of rmation of which preparer has a	my knowled	dge and
	S	ignature of officer or truste		Preparer's signature	Date (Date	Title	ΠN	
Paid	t	STEVENE		Preparer's signature	la	2 5/3	Check If self-employed P		42
Pre	parer		YDES & EVA	NS /			Firm's EIN ▶ 16-07		
Use	Only	Firm's address ▶ ON							
			ELMIRA	NY		14901	11 110110 110	4-2271	
							Fo	m 990-PF	(2010)

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 THE TRIANGLE FUND 31-1591261 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 a private foundation 527 political organization 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** 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 331/3% 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 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) 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)

lame of organization	THE	TRIANGLE	FUND

Employer identification number 31-1591261

Part 1	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1_	GRATIA S LASSALLE PO BOX 8496 GREENVALLEY LAKE, CA 92341	\$225,000.	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
2	MARK KEATON 40466 SOUTHEAST TRUBEL ROAD SANDY, OR 97055	\$5,130.	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	HOPE NEWELL 408 DUFF LANE LOUISVILLE, KY 40207	\$5,000.	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-	ADELAIDE GRISWOLD 2165 VIA FUENTES VERO BEACH, FL 32963	\$10,000.	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 _	BRIAN G OOTEN 14960 SOUTH HENRICI ROAD OREGON CITY, OR 97045	\$5,000.	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
<u> 6 </u>	NINA B HOUGHTON 6 LATIMER ROAD LOS ANGELES, CA 90402	\$5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

ige .	of	of Part

Name of organization THE TRIANGLE FUND

Employer	identification numbe	г
	31-1591261	

Part I Contributors (see instructions)

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7 _	JAMES D HOUGHTON 2 WEST CEDAR STREET BOSTON, MA 02108	\$5,000.	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
8 -	PETER PAGE 6758 TIMBERLAND LANE SARASOTA, FL 34241	\$5,000.	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
9 _	ALANSON B HOUGHTON III 314 EAST 81ST STREET NEW YORK, NY 10028	\$6,000.	Person X Payroll X 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
_ 10 _	VARIOUS CONTRIBUTORS UNDER \$5000 80 E MARKET STREET CORNING, NY 14830	\$\$13,903.	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
_ 11 _	JAMES R HOUGHTON 2649 B SPENCER HILL ROAD CORNING, NY 14830	\$5,000.	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
_ 12 _	AMORY HOUGHTON JR 33 W THIRD STREET	\$	Person Payroll Noncash (Complete Part II if there is

Name of organization	THE	TRIANGLE	FUND

oloyer	identif	ication	number	
	~ 4			

			31-1391201
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13	WILLIAM HALLENBECK JR 1105 ABBEYS WAY TAMPA, FL 33602	\$5,000.	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
_ 14	ALANSON B HOUGHTON II 43 BLOCKADE DRIVE PAWLEYS ISLAND, SC 29585	\$9,000.	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
_ 15 _	ROBERT W HOUGHTON 92 MARTIN STREET ACTON, MA 01720	\$5,071.	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
		\$ 	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
		 \$	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
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Page____of ___of Partli

Name of organization THE TRIANGLE FUND

Employer identification number 31–1591261

Part II	Noncash	Property	(see instructions)	
---------	---------	-----------------	--------------------	--

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
4	488 SH CORNING INC, FMV \$9,943 CASH - \$57	_	
		\$\$	01/14/2010
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
9	95 SH PNC STOCK, FMV \$5,954, \$46 CASH	_	
		\$6,000.	06/23/2010
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
15	303 SH CORNING INC, FMV \$5,071		
		\$	06/04/2010
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u></u>		_	
		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
i) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		_ \$	

JSA 0E1254 1 000

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

0078

· THE TRIANGLE FUND

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOM

Kind of Pro	perty		Description			P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		TOTAL CAPI	TAL GAIN DIST	RIBUTIONS			7,533.	
8,928.		488 SH COR 2.	NING INC				01/01/1929 8,926.	01/29/201
2,133.		111 SH COR	NING INC				01/01/1929 2,133.	05/03/201
4,693.		303 SH COR 21.	NING INC				01/01/1941 4,672.	07/01/201
5,111.		95 SH PNC 482.	FINANCIAL SER	VICES GRO	UP		12/10/1978 4,629.	07/01/201
73,221.		1,850.405 47,000.	SH VANGUARD E	XTENDED M	KT FUND		11/21/2003 26,221.	12/01/201
1,132.		28.612 SH 748.	VANGUARD EXTE	NDED MKTS	FUND		12/19/2003 384.	12/01/201
1,295.		32.723 SH 1,018.	VANGUARD EXTE	NDED MKTS	FUND		12/23/2004 277.	12/01/201
1,355.		34.25 SH V	ANGUARD EXTEN	IDED MKTS	FUND		12/23/2005 165.	12/01/201
26,875.		1,099.176 14,242.	SH WESTPORT S	SELECT CAP	FUND		05/01/2000 12,633.	05/03/201
651.		26.618 SH 492.	WESTPORT SELE	CCT CAP FU	ND		12/28/2000 159.	05/03/201
892.		36.477 SH 718.	WESTPORT SELE	CT CAP FU	ND		12/28/2001 174.	05/03/201
142.		5.828 SH W	ESTPORT SELEC	CT CAP FUN	D		12/28/2001 27.	05/03/201

FORM 990-PF - PART IV

	FURINI 330 FF • FART IV		
CAPITAL GAINS	AND LOSSES FOR TAX ON I	NVESTMENT	INCOME
			1

	APITAL GAI			HAVEST	P	Date	Date sold	
Kind of F		Description			D	acquired	Date sold	
Gross sale price less	Depreciation allowed/	Cost or other	FMV as of	Adj basis as of	Excess of FMV over		Gain	
expenses of sale	allowable	basis	12/31/69	12/31/69	adı basıs	+	(loss)	
		664.336 SH	WESTPORT S	ELECT CAP	FUND		01/08/2002	05/03/2010
16,243.		13,041.					3,202.	
		752.852 SH	WESTPORT S	ELECT CAP	FUND		12/29/2005	05/03/2010
18,407.		18,291.	nebiioni b		10112		116.	00,00,2020
						ŀ		
TOTAL GAIN(L	oss)						71,251.	
(=								
								,
						l	:	
							,	
L		1				Ш		

- DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PF, PART I

THE TRIANGLE FUND

NET INVESTMENT INCOME	23. 23. 1. 1. 72,122.	72,146.
REVENUE AND EXPENSES PER BOOKS	72,	72,146.
DESCRIPTION	MEADOWS SECURITY COMPANY INTEREST MARKET STREET PARTNERS MEADOWS SECURITIES COMPANY DIVIDENDS	TOTAL

FEES
ACCOUNTING
ı
Н
PART
990PF,
FORM

CHARITABLE PURPOSES		0
ADJUSTED NET INCOME		0
NET INVESTMENT INCOME	20,000.	20,000.
REVENUE AND EXPENSES PER BOOKS	20,000.	20,000.
		TOTALS
DESCRIPTION	MANAGEMENT FEES	

FORM 990PF, PART I - TAXES

NET INVESTMENT INCOME	. 126	957.
REVENUE AND EXPENSES PER BOOKS	1,500.	2,457.
DESCRIPTION	FEDERAL INCOME TAX PAID FOREIGN TAXES	TOTALS

FORM 990PF, PART I - OTHER EXPENSES

		REVENUE
		AND
		EXPENSES
DESCRIPTION		PER BOOKS
FILING FEES		250.
WORKMAN'S COMPENSATION		323.
INSURANCE		564.
PAYCHEX, MISC EXP		4,072.
DUES		300.
TUITION AND FEES		265.
	TOTALS	5,774.

8:17:25 AM

GPQ00P M282 4/29/2011

ATTACHMENT 5

DESCRIPTION

- CORPORATE STOCK

FORM 990PF, PART II

ENDING BOOK VALUE

ENDING FMV

57,245.

400,639.

CORNING INC

TOTALS

57,245.

400,639.

9

31-1591261

- OTHER INVESTMENTS FORM 990PF, PART II

ENDING FMV	610,471.	154,114. 211,856. 150,717. 192,792. 109,623. 134,846. 50,379. 163,250. 432,594. 696,527.	16,713. 137,443.
ENDING BOOK VALUE	586,399.	64,578. 228,068. 134,849. 204,000. 97,855. 124,237. 63,142. 158,620. 274,719. 521,629.	8,547.

3,410,129.

2,940,619.

TOTALS

	11	ENDING BALANCE	1,126.	321.	1,447.
ATTACHMENT 7	ECIATION DETA	DISPOSALS			
	ACCUMULATED DEPRECIATION DETAIL	ADDITIONS	390.	154.	
	ACC	BEGINNING BALANCE	736.	167.	903.
		ENDING BALANCE	1,710.	462.	2,172.
	FIXED ASSET DETAIL	DISPOSALS			
	FIXED AS	ADDITIONS			
		BEGINNING	1,710.	462.	2,172.
		METHOD/ CLASS	ЖS	SL	
		ASSET DESCRIPTION	COMPUTER SYSTEM	MICROSOFT OFFICE	TOTALS

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u> <u>AMOUNT</u>

BOOK/TAX ADJ FOR STOCK CONTRIBUTIONS 22,785.

TOTAL 22,785.

CONTRIBUTORS	DIRECT PUBLIC SUPPORT	225,000.	5,130.	5,000.	5,000.	5,000.	5,000.	5,000.	6,000.
NEW SUBSTANTIAL CONT	DATE	VARIOUS	04/09/2010	02/09/2010	05/04/2010	05/06/2010	05/12/2010	02/16/2010	06/23/2010
FORM 990PF, PART VII-A, LINE 10 - N	NAME AND ADDRESS	GRATIA S LASSALLE PO BOX 8496 GREENVALLEY LAKE, CA 92341	MARK KEATON 40466 SOUTHEAST TRUBEL ROAD SANDY, OR 97055	HOPE NEWELL 408 DUFF LANE LOUISVILLE, KY 40207	BRIAN G OOTEN 14960 SOUTH HENRICI ROAD OREGON CITY, OR 97045	NINA B HOUGHTON 6 LATIMER ROAD LOS ANGELES, CA 90402	JAMES D HOUGHTON 2 WEST CEDAR STREET BOSTON, MA 02108	PETER PAGE 6758 TIMBERLAND LANE SARASOTA, FL 34241	ALANSON B HOUGHTON III 314 EAST 81ST STREET NEW YORK, NY 10028

CONT'D ON NEXT PAGE

FORM 990PF, PART VII-A, LINE 10 - NEW SUBSTANTIAL CONTRIBUTORS

ATTACHMENT 9 (CONT'D)

NAME AND ADDRESS		DATE	DIRECT PUBLIC SUPPORT
JAMES R HOUGHTON 2649 B SPENCER HILL ROAD CORNING, NY 14830		05/10/2010	5,000.
AMORY HOUGHTON JR 33 W THIRD STREET CORNING, NY 14830		05/04/2010	8,000.
WILLIAM HALLENBECK JR 1105 ABBEYS WAY TAMPA, FL 33602		02/08/2010	5,000.
ALANSON B HOUGHTON II 43 BLOCKADE DRIVE PAWLEYS ISLAND, SC 29585		05/14/2010	.000,6
ROBERT W HOUGHTON 92 MARTIN STREET ACTON, MA 01720		06/04/2010	5,071.
WILSON PAGE III 1951 DUNBRODY COURT DUNEDIN, FL 34698		04/12/2010	2,209.
TOTAL CONTRIBUTION AMOUNTS	N AMOUNTS		295,410.
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DIRECTORS	
OFFICERS	
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PART	
990PF.	
FORM	֡

RS PER CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER ION BENEFIT PLANS ALLOWANCES	.0 .0	.0 .0	.0 .0	.0	.0 .0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TREASURER .50	CHAIR 1.00	DIRECTOR .50	SECRETARY ,50	DIRECTOR .50
NAME AND ADDRESS	JAMES D. HOUGHTON 2 WEST CEDAR STREET BOSTON, MA 02108	NINA B. HOUGHTON 6 LATIMER ROAD LOS ANGELES, CA 90402	GRATIA H. LASSALLE P.O. BOX 8496 GREENVALLEY LAKE, CA 92341	MARIANNE W. YOUNG MARKET STREET TRUST COMPANY 80 EAST MARKET STREET SUITE 300 CORNING, NY 14830	ROBERT W HOUGHTON 92 MARTIN STREET

ATTACHMENT 10 (CONT'D)

PART VIII

FORM 990PF,

- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

EXPENSE ACCT AND OTHER ALLOWANCES	.0	Ö	°	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	0	ō	.0	0
COMPENSATION	0	·	·	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	DIRECTOR .50	DIRECTOR .50	DIRECTOR .50	GRAND TOTALS
NAME AND ADDRESS	MACY H ALLATT MCGINNESS 711 22ND AVENUE SAN FRANCISCO, CA 94121	AMORY HOUGHTON III 9 HILLCREST COURT SOUTH SALEM, NY 10590	JOANNE HOUGHTON 314 EAST 81ST STREET NEW YORK, NY 10028	

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

CHRIS SPROULE C/O TRIANGLE FUND 80 E MARKET STREET, SUITE 202 CORNING, NY 14830 607-962-0189

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ROCKWELL MUSEUM OF ART	NONE	GENERAL SUPPORT	3,400
111 CEDAR STREET	PUBLIC		
CORNING, NY 14830			
SOUTHSIDE COMMUNITY CENTER	NONE	GENERAL SUPPORT	7,651.
PO BOX 4187	PUBLIC		
ELMIRA, NY 14904			
SALVATION ARMY	NONE	KID'S CAFE	15,000.
32 DENISON PARKWAY EAST	PUBLIC		
CORNING, NY 14830			
COMMUNITY DISPUTE RESOLUTION CENTER	NONE	CONFLICT EDUCATION PROGRAM	7,000
120 WEST STATE ST	PUBLIC		
ITHACA, NY 14850			
CATHOLIC CHARITIES OF SCHUYLER COUNTY	NONE	TEEN CENTER	5,000.
607 N FRANKLIN ST	PUBLIC		
WATKINS GLEN, NY 14891			
PROACTION OF STEUBEN AND YATES INC	NONE	GENERAL SUPPORT	5,000.
117 E STEUBEN ST SUITE 11	PUBLIC		
BATH, NY 14810			

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ATTACHMENT 12 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CORNING MUSEUM OF GLASS	NONE	HIGH SCHOOL LEARNING CENTER	3,500.
ONE MUSEUM WAY	PUBLIC		
CORNING, NY 14830			
ADDISON YOUTH CENTER	NONE	ARTS & SCIENCE ENHANCEMENT PROGRAM \$15,150	15, 125.
21 COMMUNITY DRIVE	PUBLIC		
ADDISON, NY 14801			
SPENCER VAN ETTEN CENTRAL SCHOOL	NONE	AFTER SCHOOL PROGRAMS \$5,000	5,000.
PO BOX 307	PUBLIC		
SPENCER, NY 14883			
HORNELL AREA CONCERN FOR YOUTH INC	NONE	GENERAL SUPPORT	12,000
30 SENECA STREET	PUBLIC		
HORNELL, NY 14843			
WOODHULL FAMILY COMMUNITY RESOURCE CENTER	NONE	YOUTH SERVICES	5,000.
1585 ACADEMY STREET	PUBLIC		
WOODHULL, NY 14898			
CPP SCHOOL DISTRICT HS FOR LEARNING CTR	NONE	GENERAL SUPPORT	15,224.
165 CHARLES STREET	PUBLIC		
PAINTED POST, NY 14870			

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ATTACHMENT 12 (CONT'D)

YEAR
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CONTRIBUTIONS
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FORM

NONE NONE NONE NONE NONE NONE NONE NONE		RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
NONE PUBLIC NONE PUBLIC NONE PUBLIC NONE PUBLIC NONE PUBLIC NONE PUBLIC CENERAL SUPPORT CENERAL SUPPO				
NOME PUBLIC NOME SISTERS \$2,500 YOUTH CENTER ART'S PROGRAMING \$4,000 S4,000 S4,000 PUBLIC PUBLIC NOME PUBLIC NOME SALOROMANING SALOR	NT NAME AND ADDRESS		PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
NOME NOME PUBLIC CENERAL SUPPORT PUBLIC CENERAL SUPPORT PUBLIC CENERAL SUPPORT WRAN ENVIRONMENTAL CLUB VRAN ENVIRONMENTAL CLUB SISTERS \$2,500 YOUTH CENTER ARTS PROGRAMMING 84,000 RAN ENVIRONMENTAL CLUB FUBLIC RAN ENVIRONMENTAL CLUB VRAN ENVIRONMENTAL CLUB	N YOUTH CENTER INC	NONE	YOUTH DROPIN CENTER	7,500.
NONE PUBLIC NONE PUBLIC URBAN ENVIRONMENTAL CLUB PUBLIC NONE PUBLIC RID'S CAFE PROGRAM \$15,000 BIG BROTHER'S, BIG \$1,000 SISTERS \$2,500 YOUTH CENTER ARTS PROGRAMMING \$4,000 NONE PUBLIC \$2,000 GENERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT	346 WOODLAWN AVE	PUBLIC		
NONE PUBLIC NONE PUBLIC GENERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT NONE PUBLIC NONE NONE NONE PUBLIC SISTERS \$2,500 YOUTH CENTER ARTS PROGRAMMING \$4,000 NONE BUBLIC GENERAL SUPPORT GENERAL SUPPORT FULLIC SIGNERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT PUBLIC STATES GENERAL SUPPORT FULLIC STATES GENERAL SUPPORT	ELMIRA, NY 14901			
FUBLIC GENERAL SUPPORT FUBLIC GENERAL SUPPORT RUBLIC GENERAL SUPPORT URBAN ENVIRONMENTAL CLUB FUBLIC KID'S CAFE PROGRAM \$15,000 BIG BROTHER'S, BIG SISTERS \$2,500 YOUTH CENTER ARTS PROGRAMMING \$4,000 NONE GENERAL SUPPORT FUBLIC GENERAL SUPPORT	COMPEER	NONE	MENTORING PROGRAM	8,000.
NOWE PUBLIC URBAN ENVIRONMENTAL CLUB PUBLIC NOWE NOWE WID'S CAPE PROGRAM \$15,000 BIG BROTHER'S, BIG SISTERS \$2,500 YOUTH CENTER ARTS PROGRAMMING \$4,000 NOWE PUBLIC SHOREAL SUPPORT	500 WALNUT STREET	PUBLIC		
NONE PUBLIC BUBLIC NONE NONE NONE NONE NONE NONE NONE SISTERS \$2,500 YOUTH CENTER ARTS PROGRAMMING \$4,000 NONE PUBLIC \$4,000 BUBLIC \$1,000 GENERAL SUPPORT PUBLIC SUBLIC GENERAL SUPPORT	ELMIRA, NY 14901			
NONE WINDLIC WINDLIC WID'S CAFE PROGRAM \$15,000 BIG BROTHER'S, BIG SISTERS \$2,500 YOUTH CENTER ARTS PROGRAMMING \$4,000 NONE GENERAL SUPPORT PUBLIC GENERAL SUPPORT	BATH AREA FAMILY RESOURCE CENTER	NONE	GENERAL SUPPORT	5,000.
NONE PUBLIC NONE NONE NONE SISTERS \$2,500 YOUTH CENTER ARTS PROGRAMING \$4,000 NONE GENERAL SUPPORT	216 MAPLE HEIGHTS	PUBLIC		
NONE PUBLIC NONE NONE NONE NONE NONE NONE NONE NONE GENERAL SUPPORT PUBLIC PUBLIC S1,000 GENERAL SUPPORT	BATH, NY 14810			
NONE PUBLIC NONE NONE NONE NONE GENERAL SUPPORT	TANGLEWOOD NATURE CENTER AND MUSEUM	NONE	URBAN ENVIRONMENTAL CLUB	5,000.
NONE PUBLIC SISTERS \$2,500 YOUTH CENTER ARTS PROGRAMMING \$4,000 NONE GENERAL SUPPORT	443 COLEMAN AVENUE	PUBLIC		
NONE PUBLIC SISTERS \$2,500 YOUTH CENTER ARTS PROGRAMMING \$4,000 NONE GENERAL SUPPORT	ELMIRA, NY 14903			
PUBLIC SISTERS \$2,500 YOUTH CENTER ARTS PROGRAMMING \$4,000 NONE GENERAL SUPPORT	FAMILY SERVICE SOCIETY	NONE	KID'S CAFE PROGRAM \$15,000 BIG BROTHER'S, BIG	21,500.
NONE GENERAL SUPPORT	280 PRINCETON AVE EXT	PUBLIC	SISTERS \$2,500 YOUTH CENTER ARTS PROGRAMMING	
NONE GENERAL SUPPORT PUBLIC	CORNING, NY 14830		\$4,000	
	R COUNTY YOUTH BUREAU	NONE	GENERAL SUPPORT	3,500
(FALLS, NY 14865	208 BROADWAY, SUITE 301	PUBLIC		
	: FALLS, NY 14865			

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ATTACHMENT 12 (CONT'D)		AMOUNT	7,500.		5,000.			3,000.			5,000.			
		PURPOSE OF GRANT OR CONTRIBUTION	NUTURING CONNECTIONS PROJECT		EVENING SUPPORT CENTER			GENERAL SUPPORT			GENERAL SUPPORT			
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	FOUNDATION STATUS OF RECIPIENT	NONE	PUBLIC	NONE	PUBLIC		NONE	PUBLIC		NONE	PUBLIC		
		RECIPIENT NAME AND ADDRESS	NONNIE HOOD PARENT RESOURCE CENTER	300 CIVIC CENTER PLAZA, SUITE 210 CORNING, NY 14830	GLOVE HOUSE INC	220 FRANKLIN STREET	ELMIRA, NY 14904-1706	CANISTEO VALLEY YOUTH CENTER	10 S. MAIN STREET	CANISTEO, NY 14823	JUNIOR ACHIEVEMENT	TWIN TIERS REGION	1600 COLLEGE AVENUE	ELMIRA, NY 14901

169,900, TOTAL CONTRIBUTIONS PAID

ATTACHMENT 12 PAGE 39

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Name of estate or trust

Capital Gains and Losses

▶ Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable). OMB No 1545-0092

Employer identification number

Т	HE TRIANGLE FUND				31-15912	. O.T	
Vote	: Form 5227 filers need to complete only P	arts I and II					
Par			Held One Ye	ar or Less			
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other (see instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a							
_							
	.						
						-	
_		-					
_		from Sabadula D	4 les 46			4.	
b	Enter the short-term gain or (loss), if any,					1b	
2	Short-term capital gain or (loss) from For	ms 4684, 6252,	6781, and 882	4		2	
3 4	Net short-term gain or (loss) from partner Short-term capital loss carryover Enter the					3_	
5	Carryover Worksheet		• • • • • • •	· · · · · · · · · · · · · · ·		4	()
	column (3) on the back	<u> </u>	<u> </u>	<u> </u>		5	
Par			T	ie fear		-	(f) Gain or (loss) for
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales pnce	(e) Cost or other (see instructio		the entire year Subtract (e) from (d)
6a							
b	Enter the long-term gain or (loss), if any,	from Schedule D-	1, line 6b			6b	63,718.
7	Long-term capital gain or (loss) from Fori					7	
8	Net long-term gain or (loss) from partners	ships, S corporat	ions, and other	estates or trusts		8	-
9	Capital gain distributions					9	7,533.
10	Gain from Form 4797, Part I					10	· · · · · · · · · · · · · · · · · · ·
11	Long-term capital loss carryover Enter th	e amount, if any	, from line 14 c	of the 2009 Capital Lo	SS	10	
2	Carryover Worksheet Net long-term gain or (loss). Combine line			Enter here and on li	ne 14a,	11	()
	column (3) on the back	<u> </u>			.	12	71,251.
or P	aperwork Reduction Act Notice, see the Instr	uctions for Form 1	041.		Sc	hedul	e D (Form 1041) 2010

che	dule D (Form 1041) 2010				Page 2
Pai	t III Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	(2) Total
	Caution: Read the instructions before completing this	oart.	(see instr)	or trust's	(3) Total
13	Net short-term gain or (loss)	13			
14	Net long-term gain or (loss):				71 051
	Total for year				71,251.
	Unrecaptured section 1250 gain (see line 18 of the wrksht.)			· 	
	28% rate gain				71,251.
	Total net gain or (loss). Combine lines 13 and 14a	$\overline{}$	T D: 44.4 : 45) #1:5	- 44 445 4	
o Pa	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form V, and do not complete Part IV. If line 15, column (3), is a net loss, complete Part IV.				
_	t IV Capital Loss Limitation				<u> </u>
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F			4	,
a Jota	The loss on line 15, column (3) or b \$3,000	 . 1 lin		no 34) us a loss (complete the Capital Loss
Carry	over Worksheet on page 7 of the instructions to figure your capital loss carryove	r	C 22 (0/ 1 0/// 330-1, 1/	110 04), 13 d 1003, C	complete the capital 200
Pai	t V Tax Computation Using Maximum Capital Gains Rate	s			
	n 1041 filers. Complete this part only if both lines 14a and 15 in colu			nount is entered	in Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor				
	tion: Skıp this part and complete the worksheet on page 8 of the instruc ither line 14b, col. (2) or line 14c, col. (2) is more than zero, or	ctions	it.		
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero				
	n 990-T trusts. Complete this part only if both lines 14a and 15 ar	e gair	ns, or qualified divide	ends are include	ed in income in Part I
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this pa				
eithe	er line 14b, col. (2) or line 14c, col. (2) is more than zero.				
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34)	. 17		
18	Enter the smaller of line 14a or 15 in column (2)				
	but not less than zero				
9	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) . 19				
20	Add lines 18 and 19				
21	If the estate or trust is filing Form 4952, enter the				
	amount from line 4g, otherwise, enter -0 ▶ 21			Ì	
22	Subtract line 21 from line 20 If zero or less, enter -0		· · — — — — — — — — — — — — — — — — —		
23	Subtract line 22 from line 17 If zero or less, enter -0		23		
	Established Weight About and the AZ as CO 200			,	
	Enter the smaller of the amount on line 17 or \$2,300		24		
25	Is the amount on line 23 equal to or more than the amount on line 24 Yes. Skip lines 25 and 26, go to line 27 and check the "No" box				
	No. Enter the amount from line 23		25		
26	Subtract line 25 from line 24				
27	Are the amounts on lines 22 and 26 the same?		20		
•	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin	ne 22	27		
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
29	Subtract line 28 from line 27		29		
80	Multiply line 29 by 15% (15)			30	
31	Figure the tax on the amount on line 23. Use the 2010 Tax Rate	e Sch	edule for Estates ar	nd Trusts	
	(see the Schedule G instructions in the instructions for Form 1041) $\mbox{.}$			31	
12	Add lines 30 and 31				
13	Figure the tax on the amount on line 17. Use the 2010 Tax Rate				
	(see the Schedule Ginstructions in the instructions for Form 1041).				
- 4	tau an all tauable income. Enter the amallar of line 22 or line 22 l	20 CA 2	DG OD LOTTO 10/11 (- abadula I	

G, line 1a (or Form 990-T, line 36)

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side.

THE TRIANCLE FUND.

Employer identification number 31-1591261

THE TRIANGLE FUND				31-159120	51
rt Long-Term Capital Gains and	d Losses - Asset	s Held More Tha	n One Year		
(a) Description of property (Example 100 sh 7% preferred of *Z* Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (
488 SH CORNING INC	01/01/1929	01/29/2010	8,928.	2.	8,92
111 SH CORNING INC	01/01/1929	05/03/2010	2,133.		2,13
303 SH CORNING INC	01/01/1941	07/01/2010	4,693.	21.	4,67
95 SH PNC FINANCIAL SERVICES GROUP	12/10/1978	07/01/2010	5,111.	482.	4,62
1,850.405 SH VANGUARD EXTENDED MKT FUND	11/21/2003	12/01/2010	73,221.	47,000.	26,22
28.612 SH VANGUARD EXTENDED MKTS FUND	12/19/2003	12/01/2010	1,132.	748.	38
32.723 SH VANGUARD EXTENDED MKTS FUND	12/23/2004	12/01/2010	1,295.	1,018.	27
34.25 SH VANGUARD EXTENDED MKTS FUND	12/23/2005	12/01/2010	1,355.	1,190.	16
1,099.176 SH WESTPORT SELECT CAP FUND	05/01/2000	05/03/2010	26,875.	14,242.	12,63
26.618 SH WESTPORT SELECT CAP FUND	12/28/2000	05/03/2010	651.	492.	15
36.477 SH WESTPORT SELECT CAP FUND	12/28/2001	05/03/2010	892.	718.	1
5.828 SH WESTPORT SELECT CAP FUND	12/28/2001	05/03/2010	142.	115.	
664.336 SH WESTPORT SELECT CAP FUND	01/08/2002	05/03/2010	16,243.	13,041.	3,20
752.852 SH WESTPORT SELECT CAP FUND	12/29/2005	05/03/2010	18,407.	18,291.	13
Total. Combine the amounts in colum					63,73

2010

31-1591261

THE TRIANGLE FUND
Description of Property

DEPRECIATION														
Asset description	Date placed in service	Unadjusted Cost or basis	Bus %	179 exp reduction in basis	Basis Reduction	Basis for depreciation	Beginning Accumulated / depreciation	Ending Accumulated depreciation	Me- thod	Conv	ACRS Life class	MA S CRS s class	Current-year 179 expense	Current-year depreciation
COMPUTER SYSTEM	12/10/2008	1,710.	100.000			l .I	736.	1,126.	200DE	MQ		5		39.
MICROSOFT OFFICE	12/10/2008	462.	100.000			462.	167.	321.	SI	3.000	00			15,
											-			
											-			
										+	$\frac{1}{1}$	_		
										-				
											-			
											1			
Less Retired Assets														
Subtotals		2,172.				2,172.	903.	1,447.						54
Listed Property										-	}			
											-	-		
									<u> </u>	-	-			
										_				
Less Retired Assets									_					
Subtotals														
TOTALS		2,172.				2,172.	903.	1,447.		1				54
AMORTIZATION										ì				
Asset description	Date placed in service	Cost or basis					Accumulated , amortization	Ending Accumulated amortization (Code	Life				Current-year amortization
			·.,											
													<u> </u>	
TOTALS														
*Assets Retired														

*Assets Retired JSA 0x9024 1 000

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