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# Form **990-PF**

# **Return of Private Foundation**

# or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

Department of the Treasury Internal Revenue Service

OMB No 1545-0052 2010

ror	alen	dar year 2010, or tax year beginning		, and e	naing		
G	heck	all that apply: Initial return	Initial return of a fo	-	charity	Final returi	1
Nar	ne of	Amended return	Address chang	ge		Name change	
IVAI	116 01	Toungation			A Employer identification	i number	
		MARTINI FAMILY FOUNDA		65-6469293			
Nun	nber a	nd street (or P O box number if mail is not delivered to street			Room/suite	B Telephone number	<u></u>
		C/O PROSKAUER ROSE LL	P, 1585 BROAL	DWAY		212-465-78	300
City	or to	own, state, and Z1P code				C If exemption application is p	
<u> </u>		NEW YORK, NY 10036-8				D 1. Foreign organization:	s, check here
H_C	_	type of organization: $\mathbf{X}$ Section 501(c)(3) ex				2 Foreign organizations me check here and attach co	peting the 85% test, pmputation
	Se		Other taxable private founda	tion		E If private foundation sta	tus was terminated
		rket value of all assets at end of year   J   Accounti	=	Acci	rual	under section 507(b)(1	)(A), check here 🕨 🔲
		Part II, col (c), line 16)	ther (specify)			F If the foundation is in a	
		755,028. (Part I, colu				under section 507(b)(1	
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books		ivestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received					
	2	Check If the foundation is not required to attach Sch. B			<del></del>		
	3	Interest on savings and temporary cash investments	92,626.	9	<u>2,626.</u>		STATEMENT 1
	4	Dividends and interest from securities	4,371.	<del></del>	4,371.	4,371.	STATEMENT 2
	5a	Gross rents					
	_	Net rental income or (loss)	67 271		<del></del>		<del>  </del>
ě	68	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	67,371.				
Revenue	7	assets on line 6a  Capital gain net income (from Part IV, line 2)		- 6	7,371.		<del> </del>
æ	8	Net short-term capital gain			7,571.	N/A	<del></del>
	9 Income modifications						
į	-10a	Gross sales less returns and allowances				-	
ē	7 b						
q	Э c	Gross profit or (loss)					
,===	11	Other income	3,362.		3,362.		STATEMENT 3
MAY	12	Total. Add lines 1 through 11	167,730.	16	7,730.	100,359.	
	l	Compensation of officers, directors, trustees, etc	0.		0.	0.	0.
ANSWED STATES	14	Other employee salaries and wages		·		<del></del>	
NS.	15	Pension plans, employee benefits					<del> </del>
æ		Legal fees	<del></del>				<del></del>
ڮۼ	, ו	Accounting fees Other professional fees	<u> </u>		-REC	EIVED	
А°Ш	17	Interest		$\overline{}$		100	
aţį	18	Taxes		90	MAY	10 2011	
ist	19	Depreciation and depletion		8	) WITH		
Ē	20	Occupancy				FALLIT	
¥	21	Travel, conferences, and meetings			UGL	EN, UT	
and	22	Printing and publications					
Shoperating and Administrative Exp	23	Other expenses STMT 4	55,430.		0.	0.	0.
irat	24	Total operating and administrative	55 420		•		
ŏ		expenses. Add lines 13 through 23	55,430.	·	0.	0.	137,444.
	20	Contributions, gifts, grants paid	137,444.	· <del></del>	<del></del> _	<u> </u>	137,444.
	26	Total expenses and disbursements. Add lines 24 and 25	192,874.		0.	0.	137,444.
	27	Subtract line 26 from line 12:	174,074.				1 2011230
	-	Excess of revenue over expenses and disbursements	-25,144.				
		Net investment income (if negative, enter -0-)		16	7,730.		
	C	Adjusted net income (if negative, enter -0-)				100,359.	, [
0235	01	LHA For Panerwork Reduction Act Notice see	the instructions				Form <b>990-PF</b> (2010)

# 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5 O. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 325, 741.

	2007	250.	0.		.000000
	2006				
	2005			<del> </del>	
2	Total of line 1, column (d)			2	1.125354
3	Average distribution ratio for the 5-year ba the foundation has been in existence if less	3	.375118		
4	Enter the net value of noncharitable-use as	-	4	490,779.	
5	Multiply line 4 by line 3			5	184,100.
6	Enter 1% of net investment income (1% of	Part I, line 27b)		6	1,677.
7	Add lines 5 and 6		-	7	185,777.
8	Enter qualifying distributions from Part XII	, line 4		8	137,444.
	If line 8 is equal to or greater than line 7, cl	heck the hox in Part VI. line 1h, and complete that part using	g a 1% tax rate		

See the Part VI instructions.

	n 990-PF (2010) MARTINI FAMILY FOUNDATION		<u>65-</u>	<u>6469</u>	<u> 293</u>		Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(c)	), or 4	948	- see i	nstru	ıctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.	<u> </u>					
	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 here 🕨 🔲 and enter 1%	•	1			3,3	55.
	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).	J	}				
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_			3,3	55.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		_ 5			3,3	<u>55.</u>
6	Credits/Payments:						
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 6a						
b	Exempt foreign organizations - tax withheld at source 6b		]				
C	Tax paid with application for extension of time to file (Form 8868)						
d	I Backup withholding erroneously withheld		1				
7	Total credits and payments. Add lines 6a through 6d		7				<u>   0                                 </u>
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached		_ 8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9			<u>3,3</u>	<u>55.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10				
_	Enter the amount of line 10 to be: Credited to 2011 estimated tax	ded 🚩	11				
Pa	art VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or i	ntervene	ın			Yes	_
	any political campaign?				<u>1a</u>		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for defin				1b_		<u> X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials p	oublishe	d or				
	distributed by the foundation in connection with the activities						
	Did the foundation file Form 1120-POL for this year?				1c		X
d	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	_					
	(1) On the foundation. $\blacktriangleright$ \$ (2) On foundation managers. $\blacktriangleright$ \$	0.	•				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundat	on					
	managers. > \$O.				_		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		<u>X</u> _
	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 incorp	oration,	or				7.7
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3	ļ. —	X
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		3.7	/A	4a 4b		X
	o If "Yes," has it filed a tax return on Form 990-T for this year?		1/	/ A		}	X
5					5_		
	If "Yes," attach the statement required by General Instruction T.						
b	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:						
	By language in the governing instrument, or  Product to a short of several and the conflict with	the ctat	a law				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with	iiic Siai	G IQ VV		6		х
7	remain in the governing instrument?  Did the foundation have at least \$5,000 in assets at any time during the year?				7	X	
′	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.						<del></del>
٥.	a Enter the states to which the foundation reports or with which it is registered (see instructions)					1	
Q8	NY						
	o If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designation)	;)				ł	}
C	of each state as required by General Instruction G? If "No," attach explanation	"			8b	х	
9		) for cale	endar			<u> </u>	
J	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV	,			9		x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and address	es			10	Х	<del></del>

_	n 990-PF (2010) MARTINI FAMILY FOUNDATION 65	5-646929	3	Page 5
P	art VII-A Statements Regarding Activities (continued)			
11	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 instructions)	11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before		7	
	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		
	Website address ► N/A			<del></del>
14	The books are in care of ▶ PROSKAUER ROSE LLP Telephone no. ▶	212-969-	3000	
		P+4 <b>▶</b> 1003		
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	ıs I	N/A	
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,	<u> </u>	Yes	No
	securities, or other financial account in a foreign country?	16		X
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of	10		-
	the foreign country	j		
P	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			Ь
<u> </u>	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1.	a During the year did the foundation (either directly or indirectly):	<u> </u>	1.03	110
- 10		X No	1	
		ا ۱۳۵	ļ	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	X No	1	
	i i i i i i i i i i i i i i i i i i i			
		X No	-	
		X No	-{	
	(5) Transfer any income or assets to a disqualified person (or make any of either available	<u> </u>	-	
		X No	-	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	ıf the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)	X No	1	
!	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	N/A 1b		
	Organizations relying on a current notice regarding disaster assistance check here			
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2010?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
	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?	X No		
	If "Yes," list the years  ,,,,,,,			
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	j	1	
•	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 instructions.)	N/A 2b	İ	
	the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	20	<del></del>	<del>                                     </del>
2	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		1	
0	during the year?	X No	1	1
,	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	100		
1		000		}
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispute the language of the 10 of the 10 of the language of the 10 of the 10 of the language of the 10 of	196		
	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,	NT / A		1
_	Form 4720, to determine if the foundation had excess business holdings in 2010)	N/A 3b		-
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	48	+	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose th			١,,
	had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b	1	X

Form 990-PF (2010) MARTINI FAMILY FOUNDATIO		·	65-64692	93 Page 6
Part VII-B   Statements Regarding Activities for Which I	Form 4720 May Be I	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es 🗶 No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indir	ectly,		1 1
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?		es X No	] ]
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		ŀ	
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No	1 1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t			ĺĺ
the prevention of cruelty to children or animals?	, , ,		s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ter the exceptions described			
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b
Organizations relying on a current notice regarding disaster assistance check h				-
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ined		
expenditure responsibility for the grant?		. —	s No	
If "Yes," attach the statement required by Regulations section 53.4945		•/ **	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	pay promiding on		es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	arcanal hanafit contract?	L ''(		6b X
	יכו שוומו שכווכוון כטוונו מכני		F	- A
If "Yes" to 6b, file Form 8870.	holtor transportion?	v	s X No	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		16		7b
b If "Yes," did the foundation receive any proceeds or have any net income attribu		nagara Highl		70
Part VIII Information About Officers, Directors, Trusto Paid Employees, and Contractors	ees, roungation wa	inagers, migni	,	
List all officers, directors, trustees, foundation managers and their	compensation			
List all officers, directors, busices, foundation managers and their	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
C/O PROSKAUER ROSE LLP	TRUSTEE			
1585 BROADWAY			'	
NEW YORK, NY 100368299	0.00	0.	0.	0.
			1	
				L
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address of each employee paid more man \$50,000	devoted to position	(C) Compensation	and deferred compensation	allowances
NONE				
	1		1	
	1			
	1			
		<del> </del>		
	1	1		
Total number of other employees paid over \$50,000		<u> </u>	<u> </u>	0
ו טעמן וועוווטפו טו טעוופו פוווטוטאַככס טעוט טאפו שטטייטט			Form	990-PF (2010)
			TOTAL	(2010)

orm 990-PF (2010) MARTINI FAMILY FOUNDATION	65-64	69293	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High Paid Employees, and Contractors (continued)			
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."			
(a) Name and address of each person paid more than \$50,000 (b) Type of se	rvice	(c) Com	pensation
NONE			
			<del></del>
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities		<u> </u>	0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the			
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses	3
NEW YORK PRESBYTERIAN HOSPITAL			
	<del></del>	20	<u>,963.</u>
2 IWHC			
		13	,056.
ALZHEIMER ASSOCIATION NYC			, , , , ,
		12	<u>,500.</u>
NANTUCKET GOLF CLUB FOUNDATION			
		11	,222.
Part IX-B Summary of Program-Related Investments			, 222.
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount	
N/A			
All other program-related investments. See instructions.			
) <u> </u>			
Feed Add Iron 1 through 2	<b>•</b>	<del></del>	0.
Total. Add lines 1 through 3		Form <b>990-F</b>	
			, ,

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	478,893.
b	Average of monthly cash balances	1b	478,893. 19,360.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	498,253.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	498,253.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	7,474.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	490,779.
6	Minimum investment return. Enter 5% of line 5	6_	24,539.
Ρ	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	24,539.
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c_	3,355.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	21,184.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	21,184.
6	Deduction from distributable amount (see instructions)	6_	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	21,184.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	137,444.
b	Program-related investments - total from Part IX-B	1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	<del></del>
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	137,444.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	137,444.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies fo	or the section

# Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	( <b>d)</b> 2010
1 Distributable amount for 2010 from Part XI, line 7				21,184.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only		· · · · · · · · · · · · · · · · · · ·	0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2010:			· ·	
a From 2005				
<b>b</b> From 2006				
c From 2007 250.				
d From 2008 71,122.				
e From 2009 82,193.				
f Total of lines 3a through e	153,565.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: $\triangleright$ \$ 137,444.				
a Applied to 2009, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.		<u> </u>	
d Applied to 2010 distributable amount			<u></u>	21,184.
e Remaining amount distributed out of corpus	116,260.			
Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	269,825.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		_0.		
d Subtract line 6c from line 6b. Taxable		- 		
amount - see instructions		0 <u>.</u>		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				_
be distributed in 2011				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.		<u> </u>	
8 Excess distributions carryover from 2005	_			
not applied on line 5 or line 7	0.	· <del></del>		
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	269,825.	·		
10 Analysis of line 9:			1	
a Excess from 2006	j			
<b>b</b> Excess from 2007 250.	]			
c Excess from 2008 71,122.	}			
d Excess from 2009 82,193.				
e Excess from 2010 116, 260.				
				Form <b>990-PF</b> (2010)

Form 990-PF (2010) MARTIN	FAMILY FOU	NDATION		65-64	69293 Page 10
Part XIV Private Operating I			-A, question 9)	N/A	
1 a If the foundation has received a ruling		, , ,			
foundation, and the ruling is effective f		<u>-</u>	▶ ∟		
b Check box to indicate whether the four	id <u>ation is a private operatii</u>	ng foundation described i		4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed	1	Ì			
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII.					<del></del>
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of			ĺ		
exempt activities					
•	<del></del>		<del></del>	<del></del>	
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the	· · · · · · · · · · · · · · · · · · ·		<del></del>	<del> </del>	
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:				<del> </del>	<del></del>
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on	1				
securities loans (section					
512(a)(5)), or royalties)			<del> </del>	<del></del>	
(2) Support from general public and 5 or more exempt		ļ			
organizations as provided in					
section 4942(j)(3)(B)(iii)				<u> </u>	
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income	<u> </u>	<u> </u>			
Part XV Supplementary Info	ormation (Comple	te this part only	if the foundatior	n had \$5,000 or mo	re in assets
at any time during	the year-see the	instructions.)			
1 Information Regarding Foundati	on Managers:				
a List any managers of the foundation w	ho have contributed more	than 2% of the total cont	ributions received by the	e foundation before the clos	e of any tax
year (but only if they have contributed	more than \$5,000). (See s	section 507(d)(2).)			
NONE					
b List any managers of the foundation w	ho own 10% or more of th	e stock of a corporation	(or an equally large port	on of the ownership of a pa	rtnership or
other entity) of which the foundation h				, ,	•
NONE					
2 Information Regarding Contribu	tion Grant Gift Loan	Scholarship, etc., Pr	ograms		
Check here ► X if the foundation		•		not accept unsolicited requi	ests for funds. If
the foundation makes gifts, grants, etc					
a The name, address, and telephone nur	<del></del>			<del></del>	
ם דוופ וומוזופ, מטערפסס, מווע נפופטווטוופ וועו	noor or the person to who	ու արբուսասութ ծուսան ևն	acai vood,		
b The form in which applications should	be submitted and informa	tion and materials they sl	nould include:		
		•			
c Any submission deadlines:					
d Any restrictions or limitations on awar	ds. such as by geographic	al areas, charitable fields.	kınds of ınstıtutıons. or	other factors:	
,	, as ay goograpino				

•

3 Grants and Contributions Paid During the Ye	3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor		Purpose of grant or contribution	Amount				
Name and address (home or business)	any foundation manager or substantial contributor	Foundation status of recipient	contribution	Ainount				
Name and address (home or business)  a Paid during the year	or substantial contributor	recipient						
SEE STATEMENT 6				105 111				
Total		<u> </u>	<u>▶ 3a</u>	137,444.				
NONE Total			<b>▶</b> 3b	0.				
<b>Total</b> 023611 12-07-10			<b>&gt;</b> 30	orm <b>990-PF</b> (2010)				

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

Enter gross amounts unless otherwise indicated.	Unrelated I	business income		y section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
_	code		code	7.11100111	
a	-			·· <del></del> · <del></del>	<del></del>
b			<del></del>		<del></del>
c					
d	- }		<del></del>		
e					
· · · · · · · · · · · · · · · · · · ·	_				
g Fees and contracts from government agencies	<del></del>				
2 Membership dues and assessments					
3 Interest on savings and temporary cash				00 505	
investments	50000	4 274	14	92,626.	
4 Dividends and interest from securities	523000	4,371.			
5 Net rental income or (loss) from real estate:					
a Debt-financed property	<del> </del>		<del></del>	<del>}-</del>	
b Not debt-financed property			<del></del>		
6 Net rental income or (loss) from personal					
property	<del> </del>		1 4	2 260	
7 Other investment income	<del> </del>		14	3,362.	
8 Gain or (loss) from sales of assets other					CD 301
than inventory	<u> </u>		<del></del>		67,371.
9 Net income or (loss) from special events			l		
10 Gross profit or (loss) from sales of inventory		<del></del>	<u> </u>		
11 Other revenue:	- }				
å			<del></del>		
b	1 1		<del></del>	<del></del>	
<u> </u>					<del></del>
0	-			<del></del>	<del></del>
12 Subtotal. Add columns (b), (d), and (e)	-	4,371.		95,988.	67,371.
13 Total. Add line 12, columns (b), (d), and (e)	\	1/9/11	<del></del> -	13	
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accon	nplishment of Ex	empt Pu	ırposes	
					<del> </del>
Explain below how each activity for which include the foundation's exempt purposes (other than			contributed	importantly to the accomp	DIISTIMENT OT
tne foundation's exempt purposes (other tha	ar by providing rand	3 for Saon parposes;			<del></del>
	<del></del>				
	<del> </del>				
	<del></del>				
<del></del>					
					·····
			<del></del>	<del></del>	
023821 12-07-10					Form <b>990-PF</b> (2010)

Fòrm 990			NI FAMILY				65-64	69293	Pa	age 13
Part )	(VII			isfers To a	and Transactions	and F	Relationships With Nonc	haritable	9	
		Exempt Organ			<del></del>		<del> </del>		Is 4	
					ng with any other organizati		, ,	1	Yes	No
					27, relating to political orgai	nization	s?			
		from the reporting found	ation to a noncharit	able exempt or	ganization of:			- }		
	Cash							1a(1)		X
(2) Other assets								1a(2)		X
• • • • • • • • • • • • • • • • • • • •		sactions:								
		of assets to a noncharital						1b(1)		X
		ases of assets from a no	•	organization				1b(2)		X
		of facilities, equipment,						1b(3)		X
		oursement arrangements	ı					1b(4)		X
		or loan guarantees						1b(5)	<b> </b> -	X
		mance of services or me						1b(6)	<b> </b> -	X
		facilities, equipment, ma		-				<u>1c</u>	ــــــــــــــــــــــــــــــــــــــ	X
			·	-			now the fair market value of the good		sets,	
		s given by the reporting to ) the value of the goods, (				ue in an	y transaction or sharing arrangeme	it, snow in		
(a) Line no		(b) Amount involved	<del></del>		exempt organization	1 (	d) Description of transfers, transactions,	and sharing an	rangeme	nts
1-7	1-	1-/	107	N/A		- <del>  '</del>		<b>3</b>		
	<del> </del>	<del></del>			<del></del>	+				
	<del>                                     </del>		<del></del>		<del></del>	1				
	1-									
				·						
		· <u> </u>		<del></del>						
	1									
-										
-	1									
	1									
2a Isth	e four	idation directly or indirect	tly affiliated with, or	related to, one	or more tax-exempt organ	ızatıons	described			_
ın s	ection	501(c) of the Code (other	r than section 501(c	c)(3)) or in sect	tion 527?			Yes	X	] No
_b_lf "Y	es,º co	mplete the following sch	edule.		·					
		(a) Name of org	janization		(b) Type of organization		(c) Description of relati	onship		
		N/A_								
						_				
				<del></del>		<b> </b>				
				<u> </u>		<u> </u>	·····	·		
	Linde	r penalties of periury. I declare	e that I have examined	this return, includ	ing accompanying schedules an	d statem	ents, and to the best of my knowledge an	belief, it is tri	ue. corre	ct.
Sign					ased on all information of which				,	,
Here	١.	1	11.		1 4/12	111	•			
	<b>  ▶</b> ·	Signature of officer or tru	ustee		Date	<u> </u>	Title			
		Print/Type preparer's na		Preparer's s		Date	Check   If   PT	IN		
		, po proparor o ne			. X/	111	self- employed			
Paid		KEVIN JOHN	ISON	Tu	1 19	14.		00544	804	
Prepa	rer	Firm's name ► FRA		LLC		<del></del>	Firm's EIN ▶ 01-			
Use C			E PENN PI		UITE 2428 _			<del>-</del>	_	
		Firm's address ► NEW YORK, NY 10119				Phone no. 212	-465-	780	0	

#### 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** MARTINI FAMILY FOUNDATION 65-6469293 Organization type (check one): Filers of: Section: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify

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

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

Name of organization

Employer identification number

## MARTINI FAMILY FOUNDATION

65-6469293

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ECI HOLDINGS, LLC  C/O PROSKAUER ROSE LLP, 1585 BROADWAY  NEW YORK, NY 10036	\$ 236,000.	Person Payroll Noncash X  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II of 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 Payroli 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
023452 12-2	2.10	\$Schedule B (Form	Person Payroll Noncash (Complete Part II if there is a noncash contribution.) 990, 990-EZ, or 990-PF) (2010)

Name of organization

# MARTINI FAMILY FOUNDATION

65-6469293

Part II No	oncash Property (see instructions)		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1 25	,000 SHS OF KKR FINANCIAL HOLDINGS	-	
		\$ 236,000.	12/07/10
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		- - - - - - - - -	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- \$	
3453 12-23-10			90, 990-EZ, or 990-PF)

hadula B. Carre	990, 990-EZ, or 990-PF) (2010)					
ne of organi			Page of or Employer identification number			
ARTINI art III	FAMILY FOUNDATION  Exclusively religious, charitable, etc., in more than \$1,000 for the year. Complete Part III, enter the total of exclusively religio	columns (a) through (e) and the follo	65-6469293 O1(c)(7), (8), or (10) organizations aggregating owing line entry For organizations completing			
a) No.	\$1,000 or less for the year (Enter this info		\$			
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, an		Relationship of transferor to transferee			
) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
art I						
	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee			
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
_						
-	(e) Transfer of gift					
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee			
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
_						
		(e) Transfer of gift				
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee			

FORM 990-PF INTEREST ON SAVINGS A	ND TEMPORARY CA	SH :	INVESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
CHARLES SCHWAB JP MORGAN 9413			_		1.
KKR FINANCIAL HOLDINGS LLC K-1 (INKR FINANCIAL HOLDINGS LLC K-1 (INKR)				92,2 3	99. 22.
TOTAL TO FORM 990-PF, PART I, LINE	3, COLUMN A		=	92,6	26.
FORM 990-PF DIVIDENDS AND	INTEREST FROM	SEC	URITIES	STATEMENT	
SOURCE	GROSS AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A	)
KKR FINANCIAL HOLDINGS LLC K-1 (DIVIDENDS)	4,356.		0.	4,3	56.
KKR FINANCIAL HOLDINGS LLC K-1 (DIVIDENDS)	15.		0.	:	15.
TOTAL TO FM 990-PF, PART I, LN 4	4,371.		0.	4,3	71.
FORM 990-PF O	THER INCOME			STATEMENT	3
DESCRIPTION	(A) REVENUE PER BOOKS		(B) NET INVEST- MENT INCOME		
KKR FINANCIAL HOLDINGS LLC K-1 (OTHER INCOME) KKR FINANCIAL HOLDINGS LLC K-1	3,3	53.	3,353	. 3,3	53.
(OTHER INCOME)		9.	9	•	9.
TOTAL TO FORM 990-PF, PART I, LINE	11 3,3	62.	3,362	. 3,3	62.

FORM 990-PF	OTHER EXPENSES			STATEMENT 4			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES' MENT INCO		(C) ADJUSTEI NET INCOM		(D) CHARITAI PURPOSI	
MISCELLANEOUS OTHER EXPENSE KKR OTHER EXPENSE KKR KKR FINANCIAL DEDUCTIONS	1,135. 31,312. 110. 22,873.		0. 0. 0.		0. 0. 0.		0.
TO FORM 990-PF, PG 1, LN 23	55,430.		0.		0.		0.
FORM 990-PF	CORPORAT	E STOCK			ST	'ATEMENT	5
DESCRIPTION			воо	K VALUE	FA	IR MARKET	r
KKR FINANCIAL HOLDINGS LLC MGIC INVESTMENT CORP APOLLO INVESTMENT CORP				220,972. 85,021. 0.		533,25 202,02	
TOTAL TO FORM 990-PF, PART I	I, LINE 10B	<del></del>		305,993.		735,28	80.

\_\_\_\_\_

	AND CONTRIBUTIONS DURING THE YEAR	STAT	EMENT 6
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
ALZHEIMER'S ASSOCIATION, NYC CHAPTER 255 N. MICHIGAN AVE FL. 17 CHICAGO, IL 60601-7633	ALZHEIMER'S	NON-PROFIT ORG.	12,500.
CHILDREN'S MUSEUM OF THE EAST END - 376 BRIDGEHAMPTON SAG HARBOR TURNPIKE BRIDGEHAMPTON, NY 11932-0316	CHILDRENS MUSEUM DEVELOPMENT	NON-PROFIT ORG.	2,850.
GIRLS INC 120 WALL STREET NEW YORK, NY 10005	GIRLS DEVELOPMENT	NON-PROFIT ORG.	900.
FRIENDS OF WASHINGTON MARKET PARK CHURCH STREET STATION PO BOX 3358 NEW YORK, NY 10008	PARK DEVELOPMENT	NON-PROFIT ORG.	2,000.
ST PAUL'S SCHOOL 325 PLEASANT STREET CONCORD, NH 03301	EDUCATION DEVELOPMENT	NON-PROFIT ORG.	1,000.
ROBIN HOOD FOUNDATION 826 BROADWAY 9TH FLOOR NEW YORK, NY 10003	TARGET POVERTY	NON-PROFIT ORG.	1,000.
JESPY HOUSE INC 102 PROSPECT STREET SOUTH ORANGE, NJ 07079	ADULT DEVELOPMENT	NON-PROFIT ORG.	1,000.
NEW YORK PRESBYTERIAN FUND INC 525 EAST 68TH STREET ST BOX 156 NEW YORK, NY 10021-4870	HEALTH AND MEDICAL FUND RAISING	501(C)3 ORG.	250.

WHITTHE THILDT FOUNDATION		0.5	-0403233
PAN MASS CHALLENGE 77 4TH AVENUE NEEDHAM, MA 02494	CANCER RESEARCH	NON-PROFIT ORG.	500.
SCDS INSPIRATION GARDEN - SHORE COUNTRY DAY SCHOOL 545 CABOT ST BEVERLY, MA 01915-2597	GARDEN MOMORIAL	NON-PROFIT ORG.	5,000.
AMERICAN MUSEUM OF NATURAL HISTORY CENTRAL PARK WEST AT 79TH STREET NEW YORK, NY 10024	MUSEUM DEVELOPMENT	NON-PROFIT ORG.	2,500.
ALS THERAPY DEVELOPMENT 215 FIRST STREET 2ND FLOOR CAMBRIDGE, MA 02142	ALS RESEARCH	NON-PROFIT ORG.	500.
NYC POLICE FOUNDATION 555 FIFTH AVENUE, 15TH FLOOR NEW YORK, NY 10017	NEW YORK CITY POLICE DEPARTMENT	NON-PROFIT ORG.	2,000.
CITY HARVEST 575 8TH AVENUE, 4TH FLOOR NEW YORK, NY 10018	FOOD FOR NEW YORK'S HUNGRY	NON-PROFIT ORG.	800.
FRIENDS WITHOUT A BORDER 1123 BROADWAY, SUITE 1210 NEW YORK, NY 10010	HEALING CHILDREN	NON-PROFIT ORG.	1,000.
AMERICAN MUSEUM OF NATURAL HISTORY CENTRAL PARK WEST AT 79TH STREET NEW YORK, NY 10024	MUSEUM DEVELOPMENT	NON-PROFIT ORG.	500.
GLOBAL DOWN SYNDROME 3300 E FIRST AVENUE SUITE 390 DENVER, CO 80206	DOWN SYNDROME RESEARCH	NON-PROFIT ORG.	1,000.
DIRTY DOZEN VOLLEYBALL 1501 OLD SHELL ROAD MOBILE, AL 36606	SCHOOL DEVELOPMENT	NON-PROFIT ORG.	3,000.

MARTINI FAMILY FOUNDATION		65	5-6469293
MCGILL TOOLEN LADIES OF LEGACY 1501 OLD SHELL ROAD MOBILE, AL 36606	SCHOOL DEVELOPMENT	NON-PROFIT ORG.	300.
AVON WALK FOR BREAST CANCER 110 WALL STREET 3RD FLOOR NEW YORK, NY 10005	BREAST CANCER RESEARCH	NON-PROFIT ORG.	500.
MSM PA		NON-PROFIT ORG.	250.
MUSEUM NATURAL HISTORY CENTRAL PARK WEST AT 79TH STREET NEW YORK, NY 10024	MUSEUM DEVELOPMENT	NON-PROFIT ORG.	115.
THE PERINATOLOGY FUND OF NY PRESBYTERIAN HOSPITAL 654 WEST 170TH STREET NEW YORK, NY 10032	HOSPITAL DEVELOPMENT	NON-PROFIT ORG.	20,963.
IWHC 333 7TH AVENUE, 6TH FLOOR NEW YORK, NY 10001	WOMEN DEVELOPMENT	NON-PROFIT ORG.	13,056.
UNICEF 125 MAIDEN LANE, 11TH FLOOR NEW YORK, NY 10038	CHILDREN DEVELOPMENT	NON-PROFIT ORG.	8,228.
PARTNERS IN HEALTH PO BOX 845578 BOSTON, MA 02284	HEALTH CARE FOR POOR	NON-PROFIT ORG.	10,000.
FRIENDS OF HUDSON RIVER PARK 23RD STREET NEW YORK, NY 10011	MAINTAINING PUBLIC PARKS	NON-PROFIT ORG.	8,000.
FRIENDS OF THE HIGH LINE 529 WEST 20TH STREET SUITE 8W NEW YORK, NY 10011	PARK DEVELOPMENT	NON-PROFIT ORG.	3,384.

MARTINI FAMILY FOUNDATION		6	5-6469293
FRIENDS OF THE HIGH LINE 529 WEST 20TH STREET SUITE 8W NEW YORK, NY 10011	PARK DEVELOPMENT	NON-PROFIT ORG.	2,038.
ROBIN HOOD FOUNDATION 826 BROADWAY 9TH FLOOR NEW YORK, NY 10003	TARGET POVERTY	NON-PROFIT ORG.	3,482.
ROBIN HOOD FOUNDATION 826 BROADWAY 9TH FLOOR NEW YORK, NY 10003	TARGET POVERTY	NON-PROFIT ORG.	2,186.
CATHARINE COOK		NON-PROFIT ORG.	3,649.
CATHARINE COOK		NON-PROFIT ORG.	2,925.
NANTUCKET GOLF CLUB FOUNDATION 250 MILESTONE ROAD PO BOX 313 SIASCONSET, MA 02564	CHILDREN DEVELOPMENT	NON-PROFIT ORG.	11,222.
ALZHEIMER'S DISEASE	ALZHEIMER'S	NON-PROFIT ORG.	6,935.
MASSACHUSETTS EYE AND EAR 243 CHARLES STREET BOSTON, MA 02114	EYE AND EAR RESEARCH	NON-PROFIT ORG.	850.
MASSACHUSETTS EYE AND EAR 243 CHARLES STREET BOSTON, MA 02114	EYE AND EAR RESEARCH	NON-PROFIT ORG.	1,061.
TOTAL TO FORM 990-PF, PART XV, LI	INE 3A		137,444.