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SCANNED FEB 7 & 2012

ETT EXTERSION ATTACHED

Return of Private Foundation

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

		erue Service				be able t	to use a copy of this						`	
		dar year 2010,	or tax ye	1	-	1,	2010	, and e		<u>JUN</u>	30,	2011		
G C	heck	all that apply:		Initial return			Initial return of a fo	•	charity		لــا .	Final return	1	
				Amended re	eturn		Address chan	ge		Name c				
Nan	ne of	foundation								A Emp	loyer id	entification	ı number	
			_										•	
				AMILY					I s			39604	<u> </u>	
Num	ber ar	nd street (or PO t			livered to street	t address)			Room/suite	B Tele	•		110	
L		PO BO		<u>4</u> 7								46-88		
City	or to	wn, state, and		DD 4M	0.675	,				1			ending, check t	
<u></u>				RD, CT						2 5	oreign org	rganization: janizations me	s, check here eeting the 85% i omputation	test,
H_C		type of organiz ction 4947(a)(1			· · · · · · · · · · · · · · · · · · ·		rivate foundation exable private founda	ntion		cl	neck here	and attach co	omputation	
		rket value of all			J Account			Acci	rual				itus was term)(A), check he	
		Part II, col (c),		cilu oi yeai		ther (sp			uui					
(<i>iii</i>		art ii, cor (c),	3 49	4 490.	(Part I. colu	ımn (d)	must be on cash	basis)					60-month ter)(B), check he	
		Analysis of R	levenue a	nd Expenses		T) Revenue and	1	nvestment	1) Adius		(d) Dist	bursements
· ·		(The total of amonecessarily equi	ounts in coli	lumns (b), (c), an	d (d) may not		enses per books		ome	"	incor			able purposes basis only)
	1	Contributions,	gifts, gran	nts, etc., recei	ved						N/A			
		Check X												
	3	Interest on saving	gs and temp s	porary			105,145.	10	5,145.				STATE	MENT 1
	4	Dividends and			3						_			
	5a	Gross rents					133,912.	13	3,912.				STATE	MENT 2
	b	Net rental income	e or (loss)	133	,912.									
a	6a	Net gain or (loss)		of assets not on I	line 10		-81.			<u> </u>			<u> </u>	
Revenue	b	Gross sales price assets on line 6a	e for all		<u>-81.</u>									
eve	7	Capital gain net i	ncome (from	n Part IV, line 2)					0.				-	
Œ	8	Net short-term Income modifi	eapital pa	TYPD						ļ				
	9	Income modifi Gross sales less	cations	1000	7.0					ļ			 	
	10a	and allowances			18/	ļ				ļ				
	b	Less Ss of go	व्यक्तिल र	4 2012	181	<u> </u>				ļ.—-			 	
	C	Gross Profit or			78		1 074		1 074	-			CM3 MDI	ACTINITIES 2
	11	Other income		N. UT	1	-	1,074.	24	1,074. 0,131.	-			STATE	MEMT. 2
	12	Total. Add life				 	240,050. 48,000.	24	4,800				+	48,000.
	13	Other employe			s, etc		40,000.		4,000	 			 	<u> </u>
	14 15	Pension plans		ŭ									 	
es		Legal fees	, employe	פוופוונט			4-			-			<u> </u>	
šuš		Accounting fee	es	ςπ	тит 4	-	3,500.		0 .					3,500.
Expens		Other professi		51			3,300.			1				
e E	17	Interest												
Operating and Administrative	18	Taxes		ST	MT 5		6,673.		0 ,					6,673.
istr	19	Depreciation a	ınd depleti											
Ē	20	Occupancy	•											
Ad	21	Travel, confere	ences, and	d meetings										
pue	22	Printing and p	ublication							ļ			<u> </u>	
ng 8	23	Other expense	es	ST	MT 6		4,154.		0	·			 	4,154.
atii	24	Total operation	-											.
þer		expenses Ad		-			62,327.	-	4,800	·				<u>62,327.</u>
0	25	Contributions,	-			<u> </u>	83,579.	 		 			 	<u>83,579.</u>
	26	Total expense		bursements										45 666
		Add lines 24 a					145,906.	-	4,800	·			 1	<u>45,906.</u>
	27	Subtract line 2	26 from lin	ne 12:										
	1	Excess of revenu					94,144.		VE 224	-			 	
	ı	Net investmen						23	35,331	'	37/3		 	_
0225		Adjusted net i	income (if	negative, enter	-0-)	<u> </u>		_			N/2	3		M DE (0040)

023501 12-07-10 LHA For Paperwork Reduction Act Notice, see the instructions.

2010.05041 GALLANT FAMILY FOUNDATION, I 13303961

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Page 2

P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	·
		Colonia sugar de los estas de la seria de la colonia de la	(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing	500 015		
		Savings and temporary cash investments	623,245.	142,914.	142,914.
	3	Accounts receivable ►			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable >			
		Less. allowance for doubtful accounts ▶			
		Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
]	7	Other notes and loans receivable			
		Less allowance for doubtful accounts ▶			
ats		Inventories for sale or use			
Assets		Prepaid expenses and deferred charges		4,317.	4,317.
۷	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 7	1,188,836.	1,557,585.	1,557,585.
Ì	C	Investments - corporate bonds STMT 8	1,529,689.	1,698,945.	1,698,945.
]	11	investments land, buildings and equipment basis			
		Less accumulated depreciation			
- 1	12	Investments - mortgage loans			
	13	Investments - other STMT 9	58,576.	90,729.	90,729.
ĺ	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
	15	Other assets (describe)			
			ļ		
\perp		Total assets (to be completed by all filers)	3,400,346.	3,494,490.	3,494,490.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ab		Mortgages and other notes payable			
_	22	Other liabilities (describe)			
\dashv	23	Total liabilities (add lines 17 through 22)	0.	0.	
ļ		Foundations that follow SFAS 117, check here			
S		and complete lines 24 through 26 and lines 30 and 31			
nces		Unrestricted			
alai	25	Temporarily restricted			
Fund Balan	26	Permanently restricted			
5		Foundations that do not follow SFAS 117, check here			
⋋		and complete lines 27 through 31.	2 245 075	2 400 245	
sts		Capital stock, trust principal, or current funds	3,345,875.	3,400,345.	
SS	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	54,471.	94,145.	
ž	30	Total net assets or fund balances	3,400,346.	3,494,490.	
		7 . 10 10 0	2 400 246	2 404 400	
ᆜ	31_	Total liabilities and net assets/fund balances	3,400,346.	3,494,490.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		***
		agree with end-of-year figure reported on prior year's return)		1	3,400,346.
		amount from Part I, line 27a		2	94,144.
		rincreases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	3,494,490.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	3,494,490.
					Form 990-PF (2010)

145,906.

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

Enter qualifying distributions from Part XII, line 4

Form	990-PF (2010) GALLANT FAMILY FOUNDATION, INC.	13-	-303	9604		Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e),	or 4948	- see	instru	ctior	าร)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter:				<u></u>	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1	1		4,7	07.
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3			4,7	07.
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			4,7	07.
6	Credits/Payments.					
a	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 2, 31	6.	1			
b	Exempt foreign organizations - tax withheld at source					
С	Tax paid with application for extension of time to file (Form 8868) 6c 2,48	7.				
d	Backup withholding erroneously withheld 6d					
	Total credits and payments. Add lines 6a through 6d	7			4,8	03.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				8.
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9				
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶ 10				88.
11	Enter the amount of line 10 to be: Credited to 2011 estimated tax	▶ 11				0.
Pa	rt 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 inter-	vene in			Yes	No
	any political campaign?			1a		_X_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition	n)?		1b		_X_
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials pub	lished or				
	distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?			1c		_X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$	0.				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$ 0 .					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		_X_
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporate	ion, 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		<u>X</u>
	If "Yes," has it filed a tax return on Form 990-T for this year?	1	$A \setminus R$	_4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		<u>X</u>
	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			7.	
	remain in the governing instrument?			6	X	 -
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	Х	
•	If "Yes," complete Part II, col. (c), and Part XV.			1 1		
ва	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	NY, DE					
D	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			0.	X	
0	of each state as required by General Instruction G? If "No," attach explanation	r calondo-		86	Λ	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for year 2010, or the toyoble year beginning in 2010 (see year year).	i calelluaf				v
10	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their pages and addresses.			10		X X

	990-PF (2010) GALLANT FAMILY FOUNDATION, INC.	<u>13-3039</u>	604		Page 5
Pa	rt 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				
	August 17, 2008?	_	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
	Website address ► N/A				
14		▶860-54	6-8	818	
	Located at ►C/O PO BOX 1347, NEW MILFORD	ZIP+4 ▶06			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here				\Box
	and enter the amount of tax-exempt interest received or accrued during the year	15	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,			Yes	No
	securities, or other financial account in a foreign country?	1	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	•			
	the foreign country			- 1	
Pε	art 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.		·	Yes	No
10	During the year did the foundation (either directly or indirectly);				
**		es X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
		es 🗶 No		ı	
		es No	•	1	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?				
	(5) Transfer any income or assets to a disqualified person (or make any of either available				,
		es 🗓 No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No"	CO LARI NO			
	If the foundation agreed to make a grant to or to employ the official for a period after		1		
		es 🗶 No			
		69 (<u>AN</u>) 110	1		
ľ	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations				X
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	. •	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				х
_	before the first day of the tax year beginning in 2010?		1c		
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)):				
8	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	es X No			
		es LAL NO			
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,				
ı	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrec				
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attact				ŀ
	statement - see instructions.)	N/A	2b		
(s if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
)				
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	[46]			
	• • • •	es 🛣 No			
ı	olf "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons af				1
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to commissioner under section 4943(c)(7)) to commissioner under section 4943(c)(7).				
	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.)	. N/A	3b		<u> </u>
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
1	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpos	e that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2010?		4b	L	X

Form 990-PF (2010) GALLANT FAMILY FOUNDATIO			13-30396	04	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4/20 May be I	required (contin	uea)		
5a During, the year did the foundation pay or incur any amount to:	- 40.45(-)\0	v.	s X No		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			S Las Inu	1	ı
(2) Influence the outcome of any specific public election (see section 4955); o	er to carry on, directly or indire		s X No		
any voter registration drive?	2		s X No	- [1
(3) Provide a grant to an individual for travel, study, or other similar purposes			S LAS 100	1	1
(4) Provide a grant to an organization other than a charitable, etc., organizatio	ii described iii section	X Ye	s No		
509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary,	or adventional surnesses or	• • —		1	1
the prevention of cruelty to children or animals?	or eutrational purposes, or i		s X No	- 1	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	dar the evacations decoribed			Í	
section 53.4945 or in a current notice regarding disaster assistance (see instru	<u>-</u>	iii neguzuona	1	5b	X
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 f		ined		1	
expenditure responsibility for the grant?	TOTAL BIG LEX DECAUSE IT THAITE		8 . No		ı
If "Yes," attach the statement required by Regulations section 53.494	 5-5/d)				1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •		ì	- 1	1
a personal benefit contract?	pay promisino on		s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal henefit contract?	·		8b	x
If "Yes" to 6b. file Form 8870.	JOI JOHAN DENGIN CONTRACT.	•	}		+=
7a At any time during the tax year, was the foundation a party to a prohibited tax s	chelter transaction?		s X No		1
b If "Yes," did the foundation receive any proceeds or have any net income attribu	•	,	N/A	7b	+
Information About Officers Directors Truck		nagers, Highly			
Part VIII Paid Employees, and Contractors	ood, i odilaalion ill	inagoro, rugin,	•		
1 List all officers, directors, trustees, foundation managers and their	compensation.	·			··
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E	xpense nt, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	accou	nt, otner vances
STANLEY GALLANT	CHAIRMAN OF E		- damponessa		
C/O PO BOX 1347	1	•		1	
NEW MILFORD, CT 06776	1.00	0.	0.	1	0.
SUSAN GALLANT	SECRETARY & T	REASURER		†	
C/O PO BOX 1347	1			Į.	
NEW MILFORD, CT 06776	5.00	0.	0.	1	0.
ROBIN GALLANT	PRESIDENT & F	XECUTIVE	DIRE		··· ·
C/O PO BOX 1347					
NEW MILFORD, CT 06776	20.00	48,000.	0.		0.
2 Compensation of five highest-paid employees (other than those in		enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) (e)	xpense int, other
	devoted to position	(C) Compensation	and deterred compensation	allo	wances
N/A					
	0.00	0.	0.		0.
				<u> </u>	
		ļ <u> </u>			
	i .	1			
				<u> </u>	
	4	ł	1	İ	
The complete of the complete o	L	<u> </u>		<u> </u>	0
Total number of other employees part over \$50,000					IJ

Form 990-PF (2010) GALLANT FAMILY FOUNDATION, INC.	3-303960 4	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly 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 service	(c) Cor	npensation
N/A		
		0.
	ļ	
Tabel number of others recovering over \$50,000 for professional corresponding	•	0
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the	- Cynone	
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expense	
1 SEE ATTACHED		
	_	_0.
2		
3		
4		
		·—-
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount	<u></u>
1 N/A	-	
	\neg	
2		
All other program-related investments. See instructions.		
3	\dashv	
Total. Add lines 1 through 3	>	0.
	Form 990-	PF (2010)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	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	3,263,927.
b	Average of monthly cash balances	1b	298,121.
c	Fair market value of all other assets	1c	90,729.
ď	Total (add lines 1a, b, and c)	1d	3,652,777.
	Reduction claimed for blockage or other factors reported on lines 1a and		
Ĭ	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,652,777.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	54,792.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,597,985.
6	Minimum investment return Enter 5% of line 5	6	179,899.
	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.)	d certain	
1	Minimum investment return from Part X, line 6	1	179,899.
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	4,707.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	175,192.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	175,192.
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	175,192.
P	art XII Qualifying Distributions (see instructions)	· · · · · · · · · · · · · · · · · · ·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		145 006
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	145,906.
	Program-related investments - total from Part IX-B	1b	0.
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:		
	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	145 006
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	145,906.
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	145 006
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	145,906.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualities to	r the section

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,	Оограз	Tours prist to 2000	2000	
line 7				175,192.
2 Undistributed income, if any, as of the end of 2010	ľ			
a Enter amount for 2009 only			8,457.	- · · · · · · · · · · · · · · · · · · ·
b Total for prior years.				
Excess distributions carryover, if any, to 2010:		0.		
1 - 1				
a From 2005				
b From 2006 c From 2007				
d From 2008				
e From 2009				
	0.			
f Total of lines 3a through e 4 Qualifying distributions for 2010 from				
Part XII, line 4: ► \$145,906.				
a Applied to 2009, but not more than line 2a			8,457.	
b Applied to undistributed income of prior			0,43/.	-
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		- 0.		·
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount				137,449.
e Remaining amount distributed out of corpus	0.			137,142.
5 Excess distributions carryover applied to 2010	0.		-	0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract	_			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.1		
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				37,743.
7 Amounts treated as distributions out of		-		
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007		ł		
c Excess from 2008				
d Excess from 2009				
e Excess from 2010				

Part XIV Private Operating Fo	oundations (see ins			N/A	-3039604age ii
1 a If the foundation has received a ruling or			, 4000.01.07	Π/Δ	
foundation, and the ruling is effective for					
b Check box to indicate whether the found			in section	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	g roundation described	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					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter: (1) Value of all assets					
` '					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	on had \$5,000	or more in assets
at any time during t	ne year-see the i	nstructions.)			
1 Information Regarding Foundatio					
a List any managers of the foundation who year (but only if they have contributed in			ntributions received by t	he foundation before	the close of any tax
, , , , , , , , , , , , , , , , , , , ,	1016 than \$5,000). (566 5	ection 507 (u)(2).)			
NONE b List any managers of the foundation who	a own 100/ or more of th	a stock of a corporation	o for an agually large no	rtion of the ownershi	n of a partnership or
other entity) of which the foundation has			, to an equally large pu	radii or tiio owiigi siii	or a paranoromp or
NONE					
2 Information Regarding Contributi	ion, Grant, Gift, Loan.	Scholarship, etc., I	Programs:		
Check here ► X if the foundation o the foundation makes gifts, grants, etc.	inly makes contributions t	to preselected charitabl	e organizations and doe		
					7, v, unu v.
a The name, address, and telephone num	ber of the person to who	н аррисанона зновів к	e duuresseu.		
b The form in which applications should b	e submitted and informat	tion and materials they	should include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	e euch as hy geographic	al areas, charitable field	s kinds of institutions of	or other factors:	
e Any restrictions of initiations on awards	s, such as by geographica	ai ai cas, chai itabic lielu	o, amas or msatutions, t	on on actors.	
			<u> </u>		
022801 12 07-10					Form 990-PF (2010

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Ye	ear or Approved for Future	Payment		
. Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year SCHEDULE ATTACHED				
Total		, · · · · · · · · · · · · · · · · · · ·	3a	0.
b Approved for future payment				
NONE				
Total 023611 12-07-10			<u>▶ 3b</u>	0 . orm 990-PF (2010)

nter gross amounts unless otherwise indicated.	Unrelated by	isiness income	Excluded b	y section 512, 513, or 514	(e)	
	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income	
1 Program service revenue:	code		code	7 11100111	TOTAL TITLE TO THE TOTAL	
<u>a</u>	- - - - - - - - -		 			
b						
	l l		 		.	
d	i I		 			
e	— -		 			
g Fees and contracts from government agencies			 			
Membership dues and assessments		·				
Interest on savings and temporary cash						
investments	522100	105,145.				
Dividends and interest from securities						
Net rental income or (loss) from real estate:						
a Debt-financed property	532000	133,912.				
b Not debt-financed property						
Net rental income or (loss) from personal property						
Other investment income	221000	1,074.				
Gain or (loss) from sales of assets other						
than inventory	221000	-81.				
Net income or (loss) from special events						
Gross profit or (loss) from sales of inventory						
Other revenue:						
a						
b						
c	_					
d						
e						
Subtotal. Add columns (b), (d), and (e)		240,050.		0.	(
Total. Add line 12, columns (b), (d), and (e)				13	240,050	
See worksheet in line 13 instructions to verify calculation	s.)					
Part XVI-B Relationship of Activities	es to the Accom	plishment of Ex	xempt P	urposes		
Explain below how each activity for which the foundation's exempt purposes (other			A contributed	importantly to the accom	plishment of	

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).	
023621 12-07-10	Form 990-PF	(2010)

Form 990-PF (2	010) GALLA	NT FAMILY	FOUND	ATION, INC.		<u>13-303</u>	9604	Page 13_
Part XVII		~ ~	sfers To	and Transactions	and Relati	onships With Nonch	aritable	
	Exempt Organ						15.0	
				ng with any other organizati		section 501(c) of	Y	es No
	•			27, relating to political orga	nizations?			
	from the reporting found	ation to a noncharita	ble exempt or	ganization of:				32
(1) Cash							1a(1)	<u> </u>
(2) Other b Other tran							1a(2)	_ <u>_</u> _
	of assets to a noncharita	hle evernet organiza	tion				1b(1)	X
	nases of assets from a no	, .					1b(2)	X
. ,	il of facilities, equipment,	•	or garnization				1b(3)	X
,	bursement arrangements						1b(4)	X
	s or loan guarantees						1b(5)	X
	rmance of services or me	embership or fundrai	sing solicitatio	ons			1b(6)	X
c Sharing of	f facilities, equipment, ma	uling lists, other asse	ets, or paid em	ployees			1c	X
d If the ansv	ver to any of the above is	"Yes," complete the	following sche	edule. Column (b) should al	lways show the	fair market value of the goods.	, other assets	,
					ue in any transa	action or sharing arrangement,	show in	
	the value of the goods,	,						
(a) Line no	(b) Amount involved	(c) Name of	_	e exempt organization	(0) Desc	ription of transfers, transactions, and	d sharing arrang	jements
-			N/A					
	<u>.</u>							
								
		-	.					
								
					_			
								
On le the four	adation directly or indirec	the offiliated with or	rolated to and	or more toy exempt organ	uzationa dasarih			
	501(c) of the Code (other	•		e or more tax-exempt organ	iizations descrit	jeu [Yes	X No
	omplete the following sch)(a)) or iii see	11011 327		·	103	22 110
	(a) Name of org			(b) Type of organization		(c) Description of relation	ship	
	N/A							
							-14 -4 4	
ando				oing accompanying schedules are eased on all information of which		d to the best of my knowledge and b knowledge	ellet, it is true, i	correct,
Sign Here	\times K \mathcal{H}_{α}	1 /m 1		1/25	/12 .	Prosident/	ENDO.	Din
	Signature of officer or tri	ustee		Date		Title	Orac	VU.
	Print/Type preparer's na		Preparer's s		Date	Check If PTIN		
		-				self- employed		
							02144	32
Preparer	Firm's name ► SAM		LSBERG	& CO		Firm's EIN ▶		
Use Only								
	Firm's address ▶ 28	0 NORTHER	N BLVI).				
GREAT NECK, NY 11021						Phone no (516	<u> 5)504-</u>	1313

Gallant Family Foundation GRANTS Fiscal Year Ending 6/30/11

Withdrawals - Payee	Date	Number	Amount
Village Center for the Arts	11/26/10	1127	5,000.00
The Federation Jewish Coalition of West CT	11/28/10	1128	500.00
Seeds of Peace	12/13/10	1130	6,260.00
Community Culinary Scool of NW CT	01/06/11	1129	3,500.00
New Milford Community Ambulance	01/11/11	1131	500.00
New Milford Historicle Society	01/18/11	1132	500.00
New Milford Trust for Historical Preservation	01/07/11	1133	100.00
The Child Mind Institute	01/07/11	1134	1,000.00
Community Mayers Inc.	02/03/11	1135	500.00
The Greater Washington Coal. Jewish Life	01/07/11	1136	4,000.00
Village Center for the Arts	01/26/11	1138	5,000.00
Shaare Torah	02/17/11	1142	1,800.00
Housatonic Valley Asociation	05/18/11	1149	500.00
United Way	05/18/11	1150	3,000.00
United Way	05/18/11	1151	1,500.00
Pratt Nature Center	05/20/11	1153	14,620.00
New Milford Visiting Nurse	05/20/11	1154	2,300.00
New Milford Visiting Nurse	05/20/11	1155	1,000.00
African American Cultural Awareness Assoc.	05/09/11	1147	250.00
Center for Education, Imagination & Nature	05/18/11	1148	5,555.00
Temple Shalom	05/25/11	1156	5,000.00
The Childrens Center	05/25/11	1157	1,194.00
New Milford Hospital Foundation	06/06/11	1160	5,000.00
The Childrens Center	06/22/11	1161	15,000.00
		-	

83,579.00

Total

990-PF Attachment

Gallant Family Foundation E.I.N. # 13-3039604 ATTACHMENT TO 2010 FORM 990-PF RETURN OF PRIVATE FOUNDATION 2010

STATEMENT REQUIRED BY REG. §53.4945-5(d)

INFORMATION WITH RESPECT TO EXPENDITURE RESPONSIBILITY GRANTS

(1) Grantee: Village Center for the Arts

12 Main Street

New Milford, CT 06776

(2) Total Paid in Current Tax Year: \$10,000

(3) Payment Dates and Amounts:

\$ 5,000 paid on November 26th, 2010

\$ 5,000 paid on January 26th, 2011

\$10,000 Total

(4) Purpose of Grant: Operational expenses

(5) Amount of Grant Spent by Grantee: \$ 4942.60 as of January 5th 2011

(6) Diversion:

To the knowledge of the foundation, and based on the reports furnished by the grantee, no part has been used for other than its intended purpose.

(7) Date of Report(s) Received from Grantee:

January 5th 2011

(8) Verification (Optional and when applicable)

Although no independent verification of the grantee's reports was required under Reg. 53.4945-5(c), the Gallant Family Foundation did follow up the grant report with telephone conversations. That review disclosed that the grantee had complied with the terms of the grant.

FORM 990-PF INTEREST ON SAVINGS AND T	EMPORARY CASH	INVESTMENTS	STATEMENT
SOURCE			AMOUNT
HSBC - BROKERAGE HSBC - CHECKING K-1 356-358 SJP LLC K-1 SUBURBAN PROPANE PARTNERS LP SIGNATURE - CD		-	99,640 47 149 119 5,190
TOTAL TO FORM 990-PF, PART I, LINE 3,	COLUMN A	-	105,145
FORM 990-PF RENTAL	INCOME		STATEMENT
KIND AND LOCATION OF PROPERTY		ACTIVITY NUMBER	GROSS RENTAL INCOM
K-1 356-358 SJP LLC EIN 20-1311295		1	133,912
TOTAL TO FORM 990-PF, PART I, LINE 5A		-	133,912
FORM 990-PF OTHER	INCOME		STATEMENT
DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
K-1 SUBURBAN PROPANE PARTNERS LP OTHER INCOME K-1 EV ENERGY PARTNERS LP	-1,393. 123. 2,344.	-1,393 123 2,344	•
TOTAL TO FORM 990-PF, PART I, LINE 11	1,074.	1,074	•

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	3,500.	0.		3,500.	
TO FORM 990-PF, PG 1, LN 16B	3,500.	0.		3,500.	
FORM 990-PF	TAX	ES	S	TATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PAYROLL TAXES CORPORATE TAXES	4,234. 2,439.	0.		4,234. 2,439.	
TO FORM 990-PF, PG 1, LN 18	6,673.	0.		6,673.	
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LICENSES & FEES DUES AND SUBSCRIPTIONS OFFICE EXPENSE INSURANCE	250. 1,158. 1,701. 1,045.	0. 0. 0.		250. 1,158. 1,701. 1,045.	
TO FORM 990-PF, PG 1, LN 23	4,154.	0.		4,154.	

FORM 990-PF COR	PORATE STOCK		STATEMENT
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
HSBC BROKERAGE	•	1,557,585.	1,557,585
TOTAL TO FORM 990-PF, PART II, LINE	10B	1,557,585.	1,557,585
FORM 990-PF COR	PORATE BONDS		STATEMENT
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
HSBC BROKERAGE	•	1,698,945.	1,698,945
TOTAL TO FORM 990-PF, PART II, LINE	10C	1,698,945.	1,698,945
FORM 990-PF OTHE	R INVESTMENTS		STATEMENT
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
K-1 356-356 SJP LLC K-1 SUBURBAN PROPANE PARTNERS LP K-1 EV ENERGY PARTNERS LP	COST COST	46,014. 13,523. 31,192.	46,014 13,523 31,192
TOTAL TO FORM 990-PF, PART II, LINE	13	90,729.	90,729

Form **8868**

(Rev January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

City, town or post office, state, and ZIP code For a foreign address, see instructions NEW MILIFORD, CT 06776	• If you	、 are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box		•	· [X]
Electronic filing (e-fie): You can electronically life Form 8868 at you need a 3-month automatic extension of time to file (6 months for a corporation required to tile Form 9800 T), or an additional rich automate): 3-month extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, yet wow re growfells and cleck on en. feb. for Chartes's Nonprofits Part I Automatic 3-Month Extension of Time. Only submit organs! (no copies needed) A corporation significant and cleck on en. feb. for Chartes's Nonprofits Automatic 3-Month Extension of Time. Only submit organs! (no copies needed) A corporation significant organization of Time. Only submit organization en. Automatic 3-Month Extension of Time. Only submit organization (not come tax returns) Automatic 3-Month Extension of Time. Only submit organization (not come tax returns) Automatic 3-Month Extension of Time. Only submit organization (not come tax returns) Automatic 4-Month Extension of Time. Only submit organization (not come tax returns) Automatic 4-Month Extension of Time. Only submit organization Time.	• If you	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of this	form)		
required to file Form 990T, or an additional root automatic) 3-month extension of time. You can electronically file Form 980Es to required an extension of time to file any of the forms listed in Part of Part II with the exception of Form 8970. (Information Return for Transfers Associativity Part Canada (Control of Part Of Part I) and United States, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, yout wow ver good/edition and coles on e-rife for Charles & Nonzordis. Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)	Do not c	omplete Part II unless you have already been granted a	an automa	itic 3-month extension on a previously fi	led Fo	rm 8868	
of time to file any of the forms lated in Part to Part II with the exception of Form 8870, Information Return for Transfers Associated With Cortain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, yest wow mis govidile and click on e-file for Charites 8 Nonproids. Part I	Electron	ic filing (e-file). You can electronically file Form 8868 if	you need a	a 3-month automatic extension of time t	o file (i	6 months for a corp	oration
Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic fling of this form, year were respected and click on a -fel for Charles & Nonprofits. Part Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to tile Form 990-T and requesting an automatic 6-month extension check this box and complete. Part I only with other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file months extension. The contract is the form of the months extension of time to file months extension of time to file months extension. Type or Name of exempt organization. GALLANT FAMILY FOUNDATION, INC. GALLANT FAMILY FOUNDATION, INC. GALLANT FAMILY FOUNDATION, INC. I 3 – 3039604 I 4 – 3 – 3 – 3 – 3 – 3 – 3 – 3 – 3 – 3 –	required	to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically file F	orm 8	868 to request an e	xtension
yest wave respecified and click on er-fiel for Charless & Nonprofits	of time to	file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for Tran	sfers	Associated With Ce	ertain
yest wave respecified and click on er-fiel for Charless & Nonprofits	Personal	Benefit Contracts, which must be sent to the IRS in page	er format	(see instructions) For more details on ti	he elec	ctronic filing of this	form,
A Corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Type or Name of exampt organization First by the Associate for PO BOX 1347 Number, street, and room or suite no If a PO box, see instructions PO BOX 1347 Number, street, and room or suite no If a PO box, see instructions PO BOX 1347 New MILFORD, CT 06776 Enter the Return code for the return that this application is for (file a separate application for each return) Application Return Application Return Application Return Application Return Code Is For Code Form 990-12 Form 990-12 Form 990-13 Form 990-14 Form 990-15 Form		urs gov/efile and click on e-file for Chanties & Nonprofits	3	·		<u> </u>	
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income dax returns Type or Name of exampt organization	Part I	Automatic 3-Month Extension of Time	Only su	bmit original (no copies needed)		- 	
Application Return code for the return that this application is for (file a separate application for each return) Q 4	A corpora	ation required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and com	nplete		
Type or print GALLANT FAMTLY FOUNDATION, INC. GALLANT FAMTLY FOUNDATION, INC. GALLANT FAMTLY FOUNDATION, INC. University See a content of the Po Dox, see instructions PO BOX 1347 City, town or post office, state, and ZIP code For a foreign address, see instructions Name of exempt organization Return Application Return deplication Retu	Part I onl	y				>	. 🗀
Name of exampt organization Employer identification number			IICs, and t	rusts must use Form 7004 to request ar	exter	ision of time	
CALLANT FAMILY FOUNDATION, INC. Number, street, and room or suite no. If a P O box, see instructions PO BOX 1347		 			Emp	lover identification	numbor
GALLANT FAMILY FOUNDATION, INC. 13-3039604		Name of exempt organization			Emp	loyer identification	i number
Number, street, and room or suste on if a P O box, see instructions	•	GALLANT FAMILY FOUNDATION,	INC.		1 1	3-3039604	
Enter the Return code for the return that this application is for (file a separate application for each return) Application	due date for	1	ee instruc	tions			
Enter the Return code for the return that this application is for (file a separate application for each return) Application	return See						
Application Return Application Is For Code Is Forn 990 Is Forn 990	Instructions		oreign add	Iress, see instructions			
Application Return Application Is For Code Is Forn 990 Is Forn 990							
S For Code S For S Forn 990-T (corporation) Corporation	Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
S For Code S For S Forn 990-T (corporation) Corporation	Applicati	on	Return	Application			Return
Form 990 BL		on .					
Form 990-BL Form 990-EZ Form							
Form 990-EZ Form 990-F Form 990-T Q4 Form 5227 10 Form 990-T (sec 401(a) or 408(a) trust) Q5 Form 6069 11 Form 990-T (trust other than above) Q6 Form 8870 12 EAST REALTY, LLC SUITE 8 0 2 ↑ The books are in the care of ▶ 156 WILLIAM STREET NY, NY - 10038 Telephone No ▶ 212-587-6100 FAX No ▶ If the organization does not have an office or place of business in the United States, check this box If this is for the whole group, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If the sit for part of the group, check this box and attach a list with the names and EINs of all members the extension is for 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 2012 , to file the exempt organization return for the organization named above The extension is for the organization's return for I request an automation's return for I request an automati				 			
Form 990 PF Form 990 T (sec 401(a) or 408(a) trust)							
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023841 01-03-11

Form **8868**

(Rev January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

 $\triangleright x$ • If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box • If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Chanties & Nonprofits Automatic 3-Month Extension of Time. Only submit original (no copies needed) A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns **Employer identification number** Name of exempt organization Type or print GALLANT FAMILY FOUNDATION, INC. 13-3039604 File by the Number, street, and room or suite no. If a P.O. box, see instructions due date for filing your PO BOX 1347 City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions NEW MILFORD, CT 06776 0 9 Enter the Return code for the return that this application is for (file a separate application for each return) Application Application Return Return Is For Code Code Form 990 01 Form 990-T (corporation) 07 Form 1041-A Form 990-BL 80 Form 990-EZ 03 Form 4720 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 12 EAST REALTY, LLC SUITE 802 The books are in the care of \triangleright 156 WILLIAM STREET NY, NY -10038 Telephone No ► 212-587-6100 FAX No ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box | If it is for part of the group, check this box | and attach a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 2012 , to file the exempt organization return for the organization named above. The extension is for the organization's return for calendar year 2010 ► X tax year beginning JUL 1, , and ending JUN 30, Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 0. nonrefundable credits See instructions За If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0. estimated tax payments made include any prior year overpayment allowed as a credit **3b** Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions Form 8868 (Rev 1-2011) For Paperwork Reduction Act Notice, see Instructions.

023841

Return of Certain Excise Taxes Under Chapters 41 and 42 of the Internal Revenue Code

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

(Sections 170(f)(10), 664(c)(2), 4911, 4912, 4941, 4942, 4943, 4944, 4945, 4955, 4958, 4965, 4966, and 4967) ► See separate instructions.

For calendar ye	ar 2010 or other tax year beginning	JUL 1 , 2010, and	dending JUN 30	, 2011.	
Name of organ	zation or entity			Employer identification	number
GALLANI	FAMILY FOUNDATION	, INC.		13-3039604	
Number, street	and room or suite no. (or P.O. box if ma	il is not delivered to street address)		Check box for type of an	nual return;
PO BOX	1347			Form 990	Form 990-EZ
City or town, st	ate, and ZIP code			X Form 990-PF	
	FORD, CT 06776			Form 5227	
					Yes No
A Is the orga	nization a foreign private foundation with	in the meaning of section 4948(b)?			X
	tive action been taken on any taxable eve	• , ,	peing reported on this form? (Enter "N/	'A" if not applicable)	N/A
	ach a detailed description and documents	·	= :	* * * * * * * * * * * * * * * * * * * *	·
•	e correction ► \$		ed acts, or transactions), attach an exp		
	Taxes on Organization (Section				
	ndistributed income - Schedule B, line 4	<u> </u>	<u> </u>	1	
	xcess business holdings - Schedule C, lir	ne 7		2	
	nvestments that jeopardize charitable pur)	3	
	axable expenditures - Schedule E, Part I,	, ,	,	4	
	olitical expenditures - Schedule F, Part I,	***		5	
	xcess lobbying expenditures - Schedule	• •		6	
	Isqualifying lobbying expenditures - Scho			7	· · · · · · · · · · · · · · · · · · ·
	remiums paid on personal benefit contra			8	
•	eing a party to prohibited tax shelter tran		ı (h)	9	
	axable distributions - Schedule K, Part I, o		,	10	
	charitable remainder trust's unrelated bu		dule	11	
	dd lines 1 - 11)			12	
	Taxes on Managers, Self-	Dealers, Disqualified Pe	rsons, Donors, Donor Adv	isors, and Relate	ed Persons
Part II-A	Sections 4912(b), 4941(a), 4944(a	•			
		I address of person subject to tax		(b) Taxpay	
				identification n	
<u>a</u>					
<u>b</u>				<u> </u>	
<u>c</u>				 	
<u>d</u>	(c) Tax on self-dealing -	(d) Tax on investments that	T		
	Schedule A, Part II, col. (d), and Part III, col. (d)	ieòpardize charitable purpose -	(e) Tax on taxable expenditures - Schedule E, Part II, col. (d)	(f) Tax on political ex Schedule F, Part	
	and Part III, col. (d)	Schedule D, Part II, col. (d)	Concust E, 1 art ii, col. (a)	Concade 1,1 art	
<u>a</u>				 	
<u>b</u>				 	
<u>c</u>				 	
<u>d</u>	-			 	
<u>Total</u>	(a) Tay on diagnalitime labburg	(h) Tax on excess benefit	(i) Tax on being a party to prohibited	(ı) Tax on taxable dı	etributions
	(g) Tax on disqualifying lobbying expenditures - Sch H, Part II, col. (d)	(h) Tax on excess benefit transactions - Sch I, Part II, col.	tax shelter transactions - Schedule	Schedule K, Part	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(d), and Part III, col. (d)	Part II, col_(d)	<u> </u>	
<u>a</u>	 			 	
<u>b</u>					
<u>C</u>					
d	 				
<u>Total</u>	(In) Tay on prohibited benefits. Call I				
	(k) Tax on prohibited benefits - Sch L, Part II, col. (d) and Part III, col. (d)			(I) Total - Add cols (d	c) through (k)
	ratin, con (d) and raitin, con (d)				
<u>a</u>	-				
<u>b</u>					
<u>c</u>	 				
<u>d</u>	 - 				
Total 024061				Ear	rm 4720 (2010)
01-03-11 LH	A For Privacy Act and Paperwork Redu	ction Act Notice, see the separate i	INSTRUCTIONS.	FUI	7120 (2010)

Form 472		GALLANT FAMILY FO				13-3039604 Page 2
Part I		nary of Taxes (See Tax Paym			ions)	
		n Part II-A, column (I), that apply to man or advisors, and related persons who sig				
	amount from Pari		ii tiiis iotiii. Ii aii	signi, emer me		1
		ine 12, and Part II-B, line 1. (Make check	k(s) or money ord	ler(s) payable		
to the	United States Tr	easury.) If payment was made with Forn				2
	1	SCHEDULE A -		on Self-Dea	ling (Section 4941)	
Part I		Self-Dealing and Tax Com	putation			
(a) Act number	(b) Date of act			(c) Description	n of act	
1						
2						
3_						
4						
5		from Form 000 DE Dort VIII D. or			(f) Initial tax on self-	(0) Tax on foundation managers
(a		er from Form 990-PF, Part VII-B, or art VI-B, applicable to the act	(e) Amount	involved in act	dealing (10% of col. (e))	(if applicable) (lesser of \$20,000 or 5% of col. (e))
	·					0/ 3/0 0/ cor (e))
- ·			J			<u> </u>
Part I	I Summa	ary of Tax Liability of Self-D	eaiers and	(b) Act no. from	(c) Tax from Part I, col. (f),	(d) Self-dealer's total tax
	(a)	Names of self-dealers liable for tax		Part I, col. (a)	or prorated amount	liability (add amounts in col. (c)) (see page 6 of the instructions)
						(cospage o como momento)
						_
					<u></u>	
			 			
Part I	II Summa	ary of Tax Liability of Found	dation Mana		T	(d) Manager's total tax liability
	(a) Nam	es of foundation managers liable for tax		(b) Act no. from Part I, col. (a)	(c) Tax from Part I, col (g), or prorated amount	(add amounts in col. (c)) (see page 7 of the instructions)
						(See page 7 of the monitorio)
						\dashv
						-
				<u> </u>		
	_	SCHEDULE B - Initi			Income (Section 4942)	
		ne for years before 2009 (from Form 990				1
		ne for 2009 (from Form 990-PF for 2010 income at end of current tax year beginr				2
		(add lines 1 and 2)	miy iii ZU IU aliu i	ομυμουτίυ ιαχ		3
		line 3 here and on page 1, Part I, line 1				4
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SCHEDULE C - Initial Tax on Excess Business Holdings (Section 4943)

Business Holdings and	Computation of Tax					
•	gs in more than one business enterprise,	attach a	separate schedule fo	or each enterprise. Re	efer to the inst	tructions on page 7 for
each line item before making any Name and address of business en						
Employer identification number				>	·	
Form of enterprise (corporation, p	artnership, trust, joint venture, sole prop	orietorshi	p, etc.)		•	
			(a) Voting stock (profits interest beneficial intere	or	(b) Value	(c) Nonvoting stock (capital interest)
1 Foundation holdings in busin	ess enterprise	1				
Permitted holdings in busines	ss enterprise	2				
Value of excess holdings in b Value of excess holdings disp days; or, other value of exces subject to section 4943 tax (a	oosed of within 90 s holdings not	3				
5 Taxable excess holdings in be enterprise - line 3 minus line		_5				
6 Tax - Enter 10% of line 5 7 Total tax - Add amounts on line and (c); enter total here and c		7				
	D - Initial Taxes on Investr	nents	That Jeopard	ize Charitable	Purpose	(Section 4944)
(a) (b) Date of	s and Tax Computation (c) Description of investment		(d) Amount o		Initial tax	(f) Initial tax on foundation managers (if applicable) -
number investment			ınvestment		of col. (d))	(lesser of \$10,000 or 10% of col (d))
3 4		_				
5 Total - column (e). Enter here and	Lon page 1 Part I line 2					
	prorated amount) here and in Part II, col	umn (c),	below			
	Tax Liability of Foundation			oration of Payı	ments	
(a) Names of fo	oundation managers liable for tax		(b) Investment no. from Part I, col. (a)	(c) Tax from Part or prorated ar		(d) Manager's total tax liability (add amounts in col. (c)) (see page 10 of the instructions

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SCHEDULE E - Initial Taxes on Taxable Expenditures (Section 4945)

Common	Part I	Expenditures a	and Computati	ion of Tax			
2 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	(a) Item number	• (b) Amount		(d) Name and address o	f recipient		
3 4 5 6 6 6 6 6 6 6 6 6			ļ <u>-</u>				
(f) Question number from Form 990-PF, Part VII-8, or Form 5227, Part VI-8, applicable to the expenditure (g) Indial tax imposed on toundation (h) vivial tax imposed on toundation (h) vivial tax imposed on toundation (h) vivial tax imposed on toundation managers of adjustment of \$10,000 to \$90 entire \$10			-				
(g) indical tax imposed on foundation (g) Enter here and on age 1, Part I, line 4 (a) Names of foundation managers labels for tax (b) Amount (c) Amount (c) Amount (d) Description of political expenditure (e) Part I Expenditures and Computation of Tax (e) Amount (e) Amount (f) Date part (g) Indical tax imposed on foundation (g) Inter here and on age 1, Part I, line 4 (h) Names of foundation managers labels for tax (h) Names of foundation managers labels for tax (h) Inter no from (g) Tax from Part I, col. (h), or prorised amount) (g) Amount (h) Names of foundation managers labels for tax (h) Inter no from (g) Tax from Part I, col. (h), or prorised amount) (g) Amount (h) Names of foundation managers labels for tax (h) Inter no from (g) Tax from Part I, col. (h), or prorised amount) (g) Amount (h) Inter total (or provided amount) (h) Names of resolution of Payments (h) Inter no from (g) Tax from Part I, col. (h), or provided amount) (h) Names of resolution of Payments (h) Inter total (or provided amount) (h) Names of resolution of Payments (h) Inter total (or provided amount) (h) Names of resolution of Payments (h) Inter total (or provided amount) (h) Names of resolution of Tax (g) Date part (g) Date							
Form 5227, Part VI-B, applicable to the expenditure (20% of cot. (b)) total - column (g), Enter here and on age; I, Part I, Ima 4 age; I, Part I, Ima 4 (a) Names of foundation managers lable for tax (b) Item no. from (g) Tax Calability of Foundation Managers and Proration of Payments (a) Names of foundation managers lable for tax (b) Item no. from (g) Tax from Part I, cot. (h), or provided amount (g), see asys, 10 of the menutions SCHEDULE F - Initial Taxes on Political Expenditures (Section 4955) Part I Expenditures and Computation of Tax (a) Amount (g) Date paid (g) Description of political expenditure (g) notes its immension or mourined (g) Date paid (g) Description of political expenditure (g) notes its immension or mourined (g) Date paid (g) Description of political expenditure (g) notes its immension or mourined (g) Date paid (g) Description of political expenditure (g) notes its immension or mourined (g) Date paid (g) Description of political expenditure (g) notes its immension or mourined (g) Date paid (g) Description of political expenditure (g) notes its immension or mourined (g) Date paid (g) Description of political expenditure (g) notes its immension or mourined (g) Date paid (g) Description of political expenditure (g) notes its immension or mounted (g) Date paid (g) Description of political expenditure (g) notes its immension or mounted (g) Date paid (g) Description of political expenditure (g) notes its immension or mounted (g) Date paid (g) Description of political expenditure (g) notes its immension or mounted (g) Date paid (g) Description of political expenditure (g) notes its immension or mounted (g) Date paid (g) Date paid (g) Description of political expenditure (g) Date paid (g							
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SCHEDULE F - Initial Taxes on Political Expenditures (Section 4955) Part I Expenditures and Computation of Tax a) Item	Part II	Summary of T	ax Liability of I	Foundation Managers a			L) (d) Manager's total too habitate
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a) Item (b) Amount (c) Date paid or incurred (d) Description of political expenditure (e) Initial ix imposed on managers (if applicable) (esser of \$5,000 or 2996 of cell (b)) 1	Dord I				cal Expendit	ures (Section 4955)	
number of incurred (b) Description of political experior or foundation (10% of col. (b)) of (10% of col. (c)) of ((e) Initial tax imposed on	(f) Initial tax imposed on
2 3 4 5 5 Cotal - column (e). Enter here and on page 1, Part I, line 5 Cotal - column (f). Enter total (or prorated amount) here and in Part II, column (c), below Part II Summary of Tax Liability of Organization Managers or Foundation Managers and Proration of Payments (a) Names of organization managers or foundation managers or foundation managers liable for tax (b) Item no. from Part I, col. (f), or prorated amount (add amounts in col. (c)) (expage 11 of the instructions)	number	(b) Amount		(d) Description of political ex	penditure	organization or foundation	managers (if applicable) (lesser
3 4 5 5 Sotal - column (e). Enter here and on page 1, Part I, line 5 Summary of Tax Liability of Organization Managers or Foundation Managers and Proration of Payments (a) Names of organization managers or foundation managers or foundation managers liable for tax							
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total - column (e). Enter here and on page 1, Part I, line 5 total - column (f). Enter total (or prorated amount) here and in Part II, column (c), below Part II Summary of Tax Liability of Organization Managers or Foundation Managers and Proration of Payments (a) Names of organization managers or foundation managers or foundation managers liable for tax (b) Item no. from Part I, col. (f), or prorated amount (add amounts in col (c)) (see page 11 of the instructions)	4_						
Part II Summary of Tax Liability of Organization Managers or Foundation Managers and Proration of Payments (a) Names of organization managers or foundation managers or foundation managers liable for tax (b) Item no. from Part I, col. (f), or prorated amount (add amounts in col. (c)) (see page 11 of the instructions)	5						
Summary of Tax Liability of Organization Managers or Foundation Managers and Proration of Payments (a) Names of organization managers or foundation managers or foundation managers liable for tax (b) Item no. from Part I, col. (f), or prorated amount (add amounts in col. (c)) (see page 11 of the instructions)	Total - colu	mn (e). Enter here and on	page 1, Part I, line 5				
(a) Names of organization managers or foundation managers liable for tax (b) Item no. from Part I, col. (f), or prorated amount (c) Tax from Part I, col. (f), or prorated amount (d) Manager's total tax Hability (add amounts in col. (c)) (see page 11 of the instructions)	Total - colu Part II				on Managers ar	nd Proration of Paymer	nts
		(a) Name	s of organization man	nagers or	(b) Item no. fro	om (c) Tax from Part I, co	(d) Manager's total tax liability (add amounts in col. (c)) (see
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SCHEDULE G -	Tax on Exc	ess Lobbying	Expenditures	(Section 4911)
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1	Excess of grassroots expenditures over grassroots nontaxable amount (from Schedule C (Form 990 or 990-EZ), Part Îl-A, column (b), line 1h). (See page 11 of the instructions before making entry.)	1 _	
2	Excess of lobbying expenditures over lobbying nontaxable amount (from Schedule C (Form 990 or 990-EZ), Part II-A, column (b), line 1i). (See page 11 of the instructions before making entry.)	2	
3	Taxable lobbying expenditures - enter the larger of line 1 or line 2	3	
4	Tax - Enter 25% of line 3 here and on page 1, Part I, line 6	4	

SCHEDULE H - Taxes on Disqualifying Lobbying Expenditures (Section 4912)

Part I	Expenditures	and Computat	tion of Tax			
(a) Item number	(b) Amount	(c) Date paid or incurred	(d) Description of	flobbying expenditures	(e) Tax imposed on organization (5% of col. (b))	(f) Tax imposed on organization managers (if applicable)- (5% of col. (b))
1						
2						
3						
4	···		·			
5	·		-			
Part II Summary of Tax Liability of Organization M (a) Names of organization managers liable for tax			(b) Item no. from Part I, col. (a)	(c) Tax from Part I, col. (f), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see page 11 of the instructions)	
						*

SCHEDULE I - Initial Taxes on Excess Benefit Transactions (Section 4958)

Part I	Excess Benefit Transactions and Tax Computation						
(a) Transaction number	(b) Date of transaction	(c) Description of transaction					
1							
3							
5							
(d) Amount of excess benefit		nefit	(e) Initial tax on disqualified persons (25% of col. (d))	(f) Tax on organization managers (if applicable) (lesser of \$20,000 or 10% of col. (d))			
 _		_					
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Page 6

		DULE I - Initial Tax					ued		
Part II	Summary of 7	Tax Liability of Disc	ualified Perso	ons and Proration	of Payment	ts			
•	•	of disqualified persons liable for ta		(b) Trans no from Part I, col (a)	(C) Tax from Pa or prorated	art I, col (e),	(d) Disqualified person's total tax liability (add amounts in col. (c)) (see page 13 of the instructions)		
Part III	Summary of 1	Tax Liability of 501(c)(3), (c)(4) & ((29) Organization N	/lanagers a	nd Prora	tion of Payments		
(a) Names of 501(c)(3), (c)(4) & (29) organization managers liable for tax			(b) Trans no from Part I, col (a)	(C) Tax from Part I, col (f), or prorated amount		(d) Manager's total tax liability (add amounts in col (c)) (see page 13 of the instructions)			
		J - Taxes on Being							
Part I	Prohibited Ta (see page 13 of the i	x Shelter Transacti	ions (PTST) ar	nd Tax Imposed on	the Tax-Ex	kempt Ei	ntity		
(a) Transaction	(b) Transaction date	(c) Type of transaction 1 - Listed 2 - Subsequently listed 3 - Confidential	(d) Description of transaction						
number1		4 - Contractual protection							
3									
4									
5	<u> </u>								
(e) Did the tax-exempt entity know or have reason to know this transaction was a PTST when it became a party to the trans.? Answer Yes or No (f) Net income attributable to the finding the trans.			utable to the PTST	(g) 75% of proceeds attributable to the PTST (h) Tax imposed on the tax-exemp entity (see page 14 of the instruction					
Total - colum 024102 01-03-11	nn (h). Enter here and	on page 1, Part I, line 9					Form 4720 (2010)		

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SCHEDULE L - Taxes on Prohibited Benefits Distributed From Donor Advised Funds (Section 4967)

See page 14 of the instructions								
Part I	Prohibited Be	nefits and Tax	x Computation					
(a) Item number	(b) Date of prohibited benefit	(c) Description of benefit						
1								
2								
3								
4								
5								
(d) Amount of prohibited benefit (see instru			nefit (125% of col. (d)) actions)	(f) Tax on fund managers (if applicable) (lesser of 10% of col. (d) or \$10,000) (see instructions)				
Part II	Summary of T	ax Liability of	Donors, Donor Adv	isors, Related Pe	rsons and Proratio	n of Payments		
	(a) Names of donors, donor advisor, or related persons liable for tax			(b) Item no from Part I, col (a)	(C) Tax from Part I, col (e) or prorated amount	(d) Donor, donor advisor, or related persons total tax liability (add amounts in col. (c)) (see instructions)		
			- -					
					-			
Dove III	T 1 ! !!!	4 F 1 8 4		f Day				
Part III	lax Liability o	r Funo Manag	gers and Proration o	T Payments		(4)		
(a) Names of fund managers liable for		e for tax	(b) Item no from Part I, col (a)	(C) Tax from Part I, col (f) or prorated amount	(d) Fund managers total tax liability (add amounts in col. (c)) (see instructions)			
						-		
			·					
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Phone no. (516)504-1313

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Preparer

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