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Form 990-PF

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

OMB No. 1545-0052

2010

Department of the Treasury
Internal Revenue Service

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

For calendar year 2010, or tax year beginning 10/01, 2010, and ending 9/30, 2011

G Check all that apply: ☐ Initial return ☐ Initial Return of a former public charity ☐ Final return
☐ Amended return ☐ Address change ☐ Name changeTHE WM. BRYCE THOMPSON FOUNDATION, INC.
195 NASSAU STREET
PRINCETON, NJ 08542

A Employer identification number

22-2941409

B Telephone number (see the instructions)

609-921-7655

C If exemption application is pending, check here ☐D 1 Foreign organizations, check here ☐2 Foreign organizations meeting the 85% test, check here and attach computation ☐E If private foundation status was terminated under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐H Check type of organization: ☒ Section 501(c)(3) exempt private foundation
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, column (c), line 16)

\$ 1,079,960.

J Accounting method: ☒ Cash ☐ Accrual
☐ Other (specify) _____

(Part I, column (d) must be on cash basis)

Part 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) (see the instructions))

(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

1 Contributions, gifts, grants, etc., received (att sch)

807.

2 Ck ☒ if the foundn is not req to att Sch B

3 Interest on savings and temporary cash investments

2,408.

2,408.

N/A

4 Dividends and interest from securities

5a Gross rents

1,170.

1,170.

b Net rental income or (loss)

-1,391.

6a Net gain/(loss) from sale of assets not on line 10

b Gross sales price for all assets on line 6a

7 Capital gain net income (from Part IV, line 2)

8 Net short-term capital gain

9 Income modifications

10a Gross sales less returns and allowances

b Less Cost of goods sold

c Gross profit/(loss) (att sch)

11 Other income (attach schedule)

12 Total. Add lines 1 through 11

4,385.

3,578.

13 Compensation of officers, directors, trustees, etc.

0.

14 Other employee salaries and wages

15 Pension plans, employee benefits

16a Legal fees (attach schedule)

b Accounting fees (attach sch) SEE ST-1

1,887.

943.

c Other prof fees (attach sch) SEE ST-2

2,000.

17 Interest

18 Taxes (attach schedule)(see instr) SEE STM 3

15,825.

19 Depreciation (attach sch) and depletion

20 Occupancy

21 Travel, conferences, and meetings

22 Printing and publications

23 Other expenses (attach schedule)

SEE STATEMENT 4

838.

2,071.

-1,800.

24 Total operating and administrative expenses. Add lines 13 through 23

20,550.

2,071.

-857.

25 Contributions, gifts, grants paid PART XV

42,970.

42,970.

26 Total expenses and disbursements. Add lines 24 and 25

63,520.

2,071.

42,113.

27 Subtract line 26 from line 12:

a Excess of revenue over expenses and disbursements

-59,135.

b Net investment income (if negative, enter -0-)

1,507.

c Adjusted net income (if negative, enter -0-)

SCANNED AUG 17 2012

ADMINISTRATIVE AND OPERATING EXPENSES

24

Part II Balance Sheets

Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
ASSETS	1 Cash — non-interest-bearing			
	2 Savings and temporary cash investments	638,811.	558,457.	558,457.
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)	824.		
	7 Other notes and loans receivable (attach sch)			
	Less: allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments — U.S. and state government obligations (attach schedule)			
	b Investments — corporate stock (attach schedule)			
	c Investments — corporate bonds (attach schedule)			
	LIABILITIES	11 Investments — land, buildings, and equipment: basis	613,156.	
Less: accumulated depreciation (attach schedule) SEE STMT 5		613,156.	613,156.	520,000.
12 Investments — mortgage loans				
13 Investments — other (attach schedule)				
14 Land, buildings, and equipment: basis				
Less: accumulated depreciation (attach schedule)				
15 Other assets (describe SEE STATEMENT 6)		1,722.	1,504.	1,503.
16 Total assets (to be completed by all filers — see instructions. Also, see page 1, item I)		1,254,513.	1,173,117.	1,079,960.
17 Accounts payable and accrued expenses				
18 Grants payable				
19 Deferred revenue				
20 Loans from officers, directors, trustees, & other disqualified persons				
21 Mortgages and other notes payable (attach schedule)				
22 Other liabilities (describe)	22,261.			
23 Total liabilities (add lines 17 through 22)	22,261.	0.		
FUND ASSETS	Foundations that follow SFAS 117, check here ☒ and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted	1,232,252.	1,173,117.	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ☐ and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, building, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 Total net assets or fund balances (see the instructions).	1,232,252.	1,173,117.	
	31 Total liabilities and net assets/fund balances (see the instructions)	1,254,513.	1,173,117.	

Part III Analysis of Changes in Net Assets or Fund Balances

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)	1	1,232,252.
2 Enter amount from Part I, line 27a	2	-59,135.
3 Other increases not included in line 2 (itemize)	3	
4 Add lines 1, 2, and 3	4	1,173,117.
5 Decreases not included in line 2 (itemize)	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)— Part II, column (b), line 30	6	1,173,117.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)		(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a N/A				
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss). [If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7]	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see the instructions). If (loss), enter -0- in Part I, line 8 []	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2009	97,570.	1,073,078.	0.090925
2008	99,698.	1,846,389.	0.053996
2007	100,569.	1,342,381.	0.074918
2006	33,842.	1,345,671.	0.025149
2005	57,031.	1,042,569.	0.054702

2 Total of line 1, column (d)	2	0.299690
3 Average distribution ratio for the 5-year base period— divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.059938
4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5	4	1,100,769.
5 Multiply line 4 by line 3	5	65,978.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	15.
7 Add lines 5 and 6	7	65,993.
8 Enter qualifying distributions from Part XII, line 4	8	43,913.

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.

Part VII Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948— see the instructions)

1 a Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter 'N/A' on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary— see instr.)		1	30.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (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	30.
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	30.
6 Credits/Payments:			
a 2010 estimated tax pmts and 2009 overpayment credited to 2010	6a	1,473.	
b Exempt foreign organizations— tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	1,473.	
8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	0.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	1,443.	
11 Enter the amount of line 10 to be: Credited to 2011 estimated tax	11	0.	
		1,443.	Refunded

Part VIII Statements Regarding Activities

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		X
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation ☐ \$ 0. (2) On foundation managers ☐ \$ 0.		
e 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? ... If 'Yes,' attach a detailed description of the activities		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? ... If 'Yes,' attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	X	
8 a Enter the states to which the foundation reports or with which it is registered (see the instructions) ☐ NJ		
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		X

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Part VII B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions) ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

Organizations relying on a current notice regarding disaster assistance check here

☐**c** If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?N/A ☐ Yes ☐ No

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If 'Yes' to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

5b N/A

6b X

7b

Part VII C Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 7		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1 see instructions). If none, 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 compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 0

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE'.

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services

0

Part IX A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	
2	
3	
4	

Part IX B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0.

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, 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
b Average of monthly cash balances	1b 597,532.
c Fair market value of all other assets (see instructions)	1c 520,000.
d Total (add lines 1a, b, and c)	1d 1,117,532.
e 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 1,117,532.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4 16,763.
5 Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5 1,100,769.
6 Minimum investment return Enter 5% of line 5	6 55,038.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1 Minimum investment return from Part X, line 6	1 55,038.
2a Tax on investment income for 2010 from Part VI, line 5	2a 30.
b Income tax for 2010. (This does not include the tax from Part VI.)	2b
c Add lines 2a and 2b	2c 30.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3 55,008.
4 Recoveries of amounts treated as qualifying distributions	4 1,800.
5 Add lines 3 and 4	5 56,808.
6 Deduction from distributable amount (see instructions)	6
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7 56,808.

Part 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 43,913.
b Program-related investments— total from Part IX-B	1b
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
4 Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4 43,913.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5
6 Adjusted qualifying distributions Subtract line 5 from line 4	6 43,913.

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

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7.				56,808.
2 Undistributed income, if any, as of the end of 2010:				
a Enter amount for 2009 only			0.	
b Total for prior years: 20__, 20__, 20__		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
b From 2006				
c From 2007				
d From 2008				
e From 2009	35,018.			
f Total of lines 3a through e	35,018.			
4 Qualifying distributions for 2010 from Part XII, line 4: ▶ \$ 43,913.				
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required – see instructions).		0.		
c Treated as distributions out of corpus (Election required – see instructions).	0.			
d Applied to 2010 distributable amount				43,913.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	12,895.			12,895.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5.	22,123.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0.		
d Subtract line 6c from line 6b. Taxable amount – see instructions.		0.		
e Undistributed income for 2009. Subtract line 4a from line 2a. Taxable amount – see instructions			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) (see instructions)	0.			
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	22,123.			
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009	22,123.			
e Excess from 2010				

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N/A

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

(4) Gross investment income

[illegible]

1 Information Regarding Foundation Managers:

W. BRYCE THOMPSON, IV

NONE

a The name, address, and telephone number of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year SEE STATEMENT 8				
Total			▶ 3a	42,970.
b Approved for future payment				
Total			▶ 3b	

CLIENT WILL16

THE WM. BRYCE THOMPSON FOUNDATION, INC.

22-2941409

8/03/12

09:39AM

STATEMENT 1
FORM 990-PF, PART I, LINE 16B
ACCOUNTING FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	\$ 1,887.			\$ 943.
TOTAL	\$ 1,887.	\$ 0.		\$ 943.

STATEMENT 2
FORM 990-PF, PART I, LINE 16C
OTHER PROFESSIONAL FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
APPRAISAL FEES	\$ 2,000.			
TOTAL	\$ 2,000.	\$ 0.		\$ 0.

STATEMENT 3
FORM 990-PF, PART I, LINE 18
TAXES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
REAL ESTATE TAXES	\$ 15,825.			
TOTAL	\$ 15,825.	\$ 0.		\$ 0.

STATEMENT 4
FORM 990-PF, PART I, LINE 23
OTHER EXPENSES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INSURANCE	\$ 422.			
LICENSES AND FEES	25.			
MISCELLANEOUS	45.			
RECOVERY OF AMTS TREATED AS QUAL DIST	-1,800.			\$ -1,800.
RENTAL EXPENSES	2,561.	\$ 2,561.		
REPAIRS AND MAINTENANCE	75.			
WRITE OFF OUSTANDING CHECKS	-490.	-490.		
TOTAL	\$ 838.	\$ 2,071.		\$ -1,800.

CLIENT WILL16

THE WM. BRYCE THOMPSON FOUNDATION, INC.

22-2941409

8/03/12

09:28AM

STATEMENT 5
FORM 990-PF, PART II, LINE 11
INVESTMENTS - LAND, BUILDINGS, AND EQUIPMENT

CATEGORY	BASIS	ACCUM. DEPREC.	BOOK VALUE	FAIR MARKET VALUE
LAND	\$ 613,156.		\$ 613,156.	\$ 520,000.
TOTAL	\$ 613,156.	\$ 0.	\$ 613,156.	\$ 520,000.

STATEMENT 6
FORM 990-PF, PART II, LINE 15
OTHER ASSETS

	BOOK VALUE	FAIR MARKET VALUE
DUE FROM AFFILIATES	\$ 97.	\$ 97.
ESCROW	1,406.	1,406.
ROUNDING	1.	
TOTAL	\$ 1,504.	\$ 1,503.

STATEMENT 7
FORM 990-PF, PART VIII, LINE 1
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
W. BRYCE THOMPSON, IV 195 NASSAU STREET PRINCETON, NJ 08542	PRES/TREAS 1	\$ 0.	\$ 0.	\$ 0.
W. BRYCE THOMPSON, V 195 NASSAU STREET PRINCETON, NJ 08542	TRUSTEE 1	0.	0.	0.
LISE L. THOMPSON-BRANDER 195 NASSAU STREET PRINCETON, NJ 08542	TRUSTEE 1	0.	0.	0.
HANNAH CHAPMAN THOMPSON 195 NASSAU STREET PRINCETON, NJ 08542	TRUSTEE 1	0.	0.	0.
BARTON LIPPINCOTT THOMPSON 195 NASSAU STREET PRINCETON, NJ 08542	TRUSTEE 1	0.	0.	0.
ARCHIBALD S. REID 195 NASSAU STREET PRINCETON, NJ 08542	TRUSTEE 1	0.	0.	0.
TOTAL		\$ 0.	\$ 0.	\$ 0.

CLIENT WILL16

THE WM. BRYCE THOMPSON FOUNDATION, INC.

22-2941409

8/03/12

09:28AM

STATEMENT 8
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
ST. ALPHONSUS CHURCH 54 EAST PROSPECT STREET HOPEWELL, NJ 08525	N/A	P/CHAR	UNRESTRICTED DONATION	\$ 3,000.
AMERICAN RED CROSS 707 ALEXANDER ROAD, SUITE 101 PRINCETON, NJ 08540	N/A	P/CHAR	UNRESTRICTED DONATION	6,500.
AMWELL VALLEY AMBULANCE CORP 1141 OLD YORK ROAD RINGOES, NJ 08551	N/A	P/CHAR	UNRESTRICTED DONATION	200.
AMWELL VALLEY FIRE COMPANY 22 JOHN RINGO ROAD RINGOES, NJ 08551	N/A	P/CHAR	UNRESTRICTED DONATION	500.
ANCHOR HOUSE FOUNDATION P.O. BOX 2357 TRENTON, NJ 08607	N/A	P/CHAR	UNRESTRICTED DONATION	700.
CLOUD NINE RESCUE FLIGHTS 1738 E. THIRD ST. PMB #128 WILLIAMSPORT, PA 17701	N/A	P/CHAR	UNRESTRICTED DONATION	150.
CONSERVE WILDLIFE FOUNDATION OF NJ P.O. BOX 420 TRENTON, NJ 08625	N/A	P/CHAR	UNRESTRICTED DONATION	1,000.
FRIENDS OF ELI PARK 6 CORYELL STREET LAMBERTVILLE, NJ 08530	N/A	P/CHAR	UNRESTRICTED DONATION	150.
PRINCETON UNIVERSITY ART MUSEUM 1 NASSAU HALL PRINCETON, NJ 08544	N/A	P/CHAR	UNRESTRICTED DONATION	1,000.
FRIENDS OF THE NEW JERSEY STATE MUSEUM 205 WEST STATE STREET TRENTON, NJ 08608	N/A	P/CHAR	UNRESTRICTED DONATION	300.
HARLINGEN REFORMED CHURCH 34 DUTCHTOWN ROAD BELLE MEAD, NJ 08502	N/A	P/CHAR	UNRESTRICTED DONATION	150.

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THE WM. BRYCE THOMPSON FOUNDATION, INC.

22-2941409

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STATEMENT 8 (CONTINUED)
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
HUMAN INTERVENTION FOOD PANTRY TRUST P.O. BOX 190 MONMOUTH JUNCTION, NJ 08852	N/A	P/CHAR	UNRESTRICTED DONATION	\$ 200.
HAVEN FOR HOPE FOR KIDS P.O. BOX 292 HOPE, NJ 07844	N/A	P/CHAR	UNRESTRICTED DONATION	200.
HUNTERDON COUNTY YMCA 144 W. WOODSCHURCH ROAD FLEMINGTON, NJ 08822	N/A	P/CHAR	UNRESTRICTED DONATION	200.
KOMEN NJ RACE FOR THE CURE 785 SPRINGFIELD AVENUE SUMMIT, NJ 07901	N/A	P/CHAR	UNRESTRICTED DONATION	750.
MARCH OF DIMES NEW JERSEY CHAPTER 2400 MAIN STREET EXT., SUITE 1 SAYREVILLE, NJ 08872	N/A	P/CHAR	UNRESTRICTED DONATION	1,000.
MCCARTER THEATRE 91 UNIVERSITY PLACE PRINCETON, NJ 08540	N/A	P/CHAR	UNRESTRICTED DONATION	5,000.
MERCER ALLIANCE FOR THE MENTALLY ILL 3371 US HIGHWAY 1 #124 LAWRENCEVILLE, NJ 08648	N/A	P/CHAR	UNRESTRICTED DONATION	500.
MORVEN MUSEUM AND GARDEN 55 STOCKTON STREET PRINCETON, NJ 08540	N/A	P/CHAR	UNRESTRICTED DONATION	400.
NATIONAL WILDLIFE FEDERATION 11100 WILDLIFE CENTER DR. RESTON, VA 20190	N/A	P/CHAR	UNRESTRICTED DONATION	200.
NEW JERSEY CONSERVATION FOUNDATION 170 LONGVIEW ROAD FAR HILLS, NJ 07931	N/A	P/CHAR	UNRESTRICTED DONATION	1,000.
NEW JERSEY FARM BUREAU 168 WEST STATE STREET TRENTON, NJ 08608	N/A	P/CHAR	UNRESTRICTED DONATION	100.

CLIENT WILL16

THE WM. BRYCE THOMPSON FOUNDATION, INC.

22-2941409

8/03/12

09:28AM

STATEMENT 8 (CONTINUED)
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
NJTL OF TRENTON 439 SOUTH BROAD STREET, SUITE 208 TRENTON, NJ 08611	N/A	P/CHAR	UNRESTRICTED DONATION	\$ 200.
PRINCETON ACADEMY OF THE SACRED HEART 1128 GREAT ROAD PRINCETON, NJ 08540	N/A	P/CHAR	UNRESTRICTED DONATION	1,000.
PRINCETON CENTER FOR LEADERSHIP TRAINING 911 COMMONS WAY PRINCETON, NJ 08540	N/A	P/CHAR	UNRESTRICTED DONATION	500.
PRINCETON EDUCATION FOUNDATION P.O. BOX 176 PRINCETON, NJ 08542	N/A	P/CHAR	UNRESTRICTED DONATION	5,000.
PRINCETON HEALTHCARE SYSTEM FOUNDATION 3626 US HIGHWAY 1 PRINCETON, NJ 08540	N/A	P/CHAR	UNRESTRICTED DONATION	2,000.
PRINCETON LATIN ACADEMY FOUNDATION 174 LAMBERTVILLE-HOPEWELL RD. HOPEWELL, NJ 08525	N/A	P/CHAR	UNRESTRICTED DONATION	2,500.
SCHOOL OF PLANNING AND PUBLIC POLICY 33 LIVINGSTON AVE. NEW BRUNSWICK, NJ 08901	N/A	P/CHAR	UNRESTRICTED DONATION	200.
ST. PAUL'S CHURCH 214 NASSAU STREET PRINCETON, NJ 08542	N/A	P/CHAR	UNRESTRICTED DONATION	350.
STONY BROOK MILLSTONE WATERSHED ASSOCIAT 31 TITUS MILL ROAD PENNINGTON, NJ 08534	N/A	P/CHAR	UNRESTRICTED DONATION	210.
STUART COUNTRY DAY SCHOOL OF THE SACRED 1200 STUART ROAD PRINCETON, NJ 08540	N/A	P/CHAR	UNRESTRICTED DONATION	1,000.

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8/03/12

09:28AM

STATEMENT 8 (CONTINUED)
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
THE BRADY CENTER TO PREVENT GUN VIOLENCE P.O. BOX 96637 WASHINGTON, DC 20077	N/A	P/CHAR	UNRESTRICTED DONATION	\$ 100.
THE COLLEGE OF NEW JERSEY FOUNDATION 200 PENNINGTON ROAD EWING, NJ 08628	N/A	P/CHAR	UNRESTRICTED DONATION	250.
THE CRAWFORD HOUSE 362 SUNSET ROAD SKILLMAN, NJ 08558	N/A	P/CHAR	UNRESTRICTED DONATION	200.
THE NATURE CONSERVANCY 4245 NORTH FAIRFAX DRIVE, SUITE 100 ARLINGTON, VA 22203	N/A	P/CHAR	UNRESTRICTED DONATION	2,500.
THE PENNINGTON SCHOOL 112 WEST DELAWARE AVE. PENNINGTON, NJ 08534	N/A	P/CHAR	UNRESTRICTED DONATION	2,500.
PLANNED PARENTHOOD ASSOCIATION OF MERCER 437 EAST STATE STREET TRENTON, NJ 08608	N/A	P/CHAR	UNRESTRICTED DONATION	300.
THIRTEEN 825 EIGHTH AVENUE NEW YORK, NY 10019	N/A	P/CHAR	UNRESTRICTED DONATION	160.
TRINTIY COUNSELING SERVICE 22 STOCKTON STREET PRINCETON, NJ 08540	N/A	P/CHAR	UNRESTRICTED DONATION	500.
WOMANSPACE 1212 STUYVESANT AVENUE TRENTON, NJ 08618	N/A	P/CHAR	UNRESTRICTED DONATION	300.

TOTAL \$ 42,970.

**Application for Extension of Time To File an
Exempt Organization Return**

OMB No. 1545-1709

Department of the Treasury
Internal Revenue Service► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
- 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 Charities & Nonprofits*.

Part I 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*

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization	Employer identification number
	THE WM. BRYCE THOMPSON FOUNDATION, INC.	22-2941409
	Number, street, and room or suite number. If a P.O. box, see instructions.	
	195 NASSAU STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	PRINCETON, NJ 08542	

Enter the Return code for the return that this application is for (file a separate application for each return)

04

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► THE FOUNDATION

Telephone No. ► 609-921-7655 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.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 5/15, 20 12, to file the exempt organization return for the organization named above.
The extension is for the organization's return for:

- ☐ calendar year 20 ____ or
- ☒ tax year beginning 10/01, 20 10, and ending 9/30, 20 11.

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	30.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	1,473.
c 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.	3c	\$	0.

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.

BAA For Paperwork Reduction Act Notice, see Instructions.Form **8868** (Rev. 1-2011)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print	Name of exempt organization	Employer identification number
	THE WM. BRYCE THOMPSON FOUNDATION, INC.	22-2941409
	Number, street, and room or suite number. If a P.O. box, see instructions	
	WILLS, OWENS & BAKER, P.C. 15 ROSZEL ROAD, SUITE 104	
File by the extended due date for filing the return. See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	PRINCETON, NJ 08540	

Enter the Return code for the return that this application is for (file a separate application for each return) ... **04**

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in care of. THE FOUNDATION
Telephone No. 609-921-7655 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.

4 I request an additional 3-month extension of time until 8/15, 20 12.

5 For calendar year _____, or other tax year beginning 10/01, 20 10, and ending 9/30, 20 11.

6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

7 State in detail why you need the extension... Taxpayer respectfully requests additional time to gather information necessary to file a complete and accurate tax return.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a \$	30.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b \$	1,473.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c \$	0.

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature Kim M. Owen Title CPA Date 5/2/12

BAA

FIFZ0502L 11/15/10

Form 8868 (Rev 1-2011)