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Form 990-PF. Department of the Treasury Internal Revenue Service

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

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

2011

For calendar year 2011 or tax year beginning and ending A Employer identification number Name of foundation THE DAVID W. KNAPP CHARITABLE FOUNDATION C/O FIRST NIAGARA PRIVATE CLIENT SERVICE 06-1489095 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (203) - 789 - 2779195 CHURCH STREET City or town, state, and ZIP code C If exemption application is pending, check here NEW HAVEN, CT 06510 Initial return of a former public charity G Check all that apply: Initial return D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year J Accounting method: X Cash Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 542,374. (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)) (a) Revenue and expenses per books (b) Net investment (c) Adjusted net (d) Disbursements or charitable purposes ıncome income (cash basis only) 45,396 Contributions, gifts, grants, etc., received Check fithe foundation is not required to attach Sch. B Interest on savings and temporary cash investments 49. 49. STATEMENT 3 10,357. 10,357. STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (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 Income modifications 9 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 55,802. 10,406 0. 12 Total. Add lines 1 through 11 0. 0. 0. 0. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 1,125. 1,125. 0. 0. STMT 3 **b** Accounting fees 2,945 2,945. 0. STMT 0. c Other professional fees 17 Interest STMT 5 165. 165. 0. 0. 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings and / Other expenses EV 22 23 24 Polal operating and administrative expenses Add Jines 12 00 2016 4,235 4,235 0. Contributions, gifts, grants paid 25,163. 25,163. Total expenses and disbursements 26 Aladaha L 4,235 0. 25,163. 29,398 Subtract line 26 from line 12: 26,404 8 Excess of revenue over expenses and disbursements 6,171 b Net investment income (if negative, enter -0-) 0. c Adjusted net income (if negative, enter -0-)

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Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 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 7 Other notes and loans receivable 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 217,029. 221,020. 305,537. STMT 6 b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 236,837. 236,837. STMT 7 214,424. 13 Investments - other 14 Land, buildings, and equipment; basis Less accumulated depreciation 15 Other assets (describe ▶ 431,453. 457,857. 542,374. 16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0 23 Total liabilities (add lines 17 through 22) \mathbf{N} Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 431,453. 457,857. 24 Unrestricted 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, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 431,453. 457,857 30 Total net assets or fund balances 457,857 431,453. 31 Total liabilities and net assets/fund balances 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 30 431,453. (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 26,404. 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 4 5 Decreases not included in line 2 (itemize) Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 457,857.

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Page 3

• (a) List and desi 2-story brick w	cribe the kir varehouse; c	nd(s) of property sold (e.g. or common stock, 200 shs	., real estate, s. MLC Co.)		P -	ow acqu Purcha Donation	se	(c) Date a (mo., da	cquired y, yr.)	(d) Date sold (mo., day, yr.)
1a		<u> </u>			ļ					
b NC	ONE			-	<u> </u>			_	-	
<u>C</u>	-	 		_	-		_			- ·
<u>d</u>										-
(e) Gross sales price	(f) D	epreciation allowed (or allowable)		t or other basis xpense of sale				(h) Ga (e) plus	ın or (loss) (f) mınus (9)
a	<u></u> .			-			-			
b	<u> </u>									
<u>c</u>	 									
<u>d</u>	 				_		-			
Complete only for assets show	ing gain in G	column (h) and owned by	the foundation	on 12/31/69				Gains (Co	ol. (h) gain	minus
		i) Adjusted basis	·	cess of col. (I)				(k), but n	ot less thar	1 - 0-) o r
(i) F.M.V. as of 12/31/69	`	as of 12/31/69		col. (j), if any				Losses (from col. (I	h))
a										
b										
<u>c</u>	ļ									
<u>d</u>										
<u> </u>	<u>.l</u>		<u></u>		+					
2 Capital gain net income or (net o	capital loss)	$ \begin{cases} \text{ If gain, also enter} \\ \text{If (loss), enter -0} \end{cases} $	r in Part I, line 7 I- in Part I, line	7 7	}	2		<u>-</u>		
Net short-term capital gain or (lo	oss) as defir	ned in sections 1222(5) ar	nd (6):			ļ				
If gain, also enter in Part I, line 8	-	:).								
If (loss), enter -0- in Part I, line 8	8 Under S	ection 4940(e) for	Reduced	Tax on Net	t Inve	stme	ent inc	ome	-	
For optional use by domestic priva										
			10 10(4) 14× 011	not invocation in		,				
f section 4940(d)(2) applies, leave	this part bla	ank.								
Was the foundation liable for the se	ection 4942	tax on the distributable an	nount of any ye	ar in the base pe	eriod?					Yes X No
f "Yes," the foundation does not qu										_
Enter the appropriate amount in	n each colur	nn for each year; see instr	uctions before	making any entri	ies.					741
(a) Base period years		(b) Adjusted qualifying dis	stributione	Net value of no	(C)	tahla	ca accate	١,	Distrib	(d) ution ratio
Calendar year (or tax year begini	ning i <u>n)</u>			Net value of the	Ulichan				col. (b) div	ided by col. (c))
2010		2	21,347.				,262 ,086			.04454
2009 2008			20,806.		-		,399			.05954
2007	-		8,848.				,509			.04901
2006			5,826.				,230			.04973
				-						
2 Total of line 1, column (d)								_2		.25123
3 Average distribution ratio for the	e 5-year bas	se period - divide the total	on line 2 by 5,	or by the numbe	r of yea	rs				
the foundation has been in exist	tence if less	than 5 years						3		.05024
										-40 000
4 Enter the net value of noncharit	able-use as:	sets for 2011 from Part X,	line 5					4		510,929
								_		25 672
5 Multiply line 4 by line 3								5		25,672
C. Enter 19/ of not investment ince	omo /10/ of	Dort Livos 97h)								62
6 Enter 1% of net investment inco	UIIIE (176 OF	r ait 1, 11110 2/0)						6		02
7 Add lines 5 and 6								7		25,734
, 1.00 mios 5 and 0										23,,34
8 Enter qualifying distributions fro	om Part XII,	line 4						8		25,163

	THE DAVID W. KNAPP CHARITABLE									
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Par				4940(e), (or 4	948	- see II	nstru	ctioi	<u>ns)</u>
	exempt operating foundations described in section 4940(d)(2), check here 🕨 📖 and el)						
	Date of ruling or determination letter: (attach copy of letter if nec									
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	-	and enter 1	% P	}	_1_			1	<u>23.</u>
	of Part I, line 27b									
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%			OI. (D). J		•				0
	ax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Of	iners e	nter -U-)		ł	2			1	$\frac{0.}{23.}$
	Add lines 1 and 2	\thoro c	ntor () \		}	3			<u>_</u>	<u> </u>
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. O	Aners e	enter -u-)		ł	<u>4</u> 5			1	$\frac{0.}{23.}$
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				ŀ	<u> </u>				<u> </u>
	Credits/Payments:	6a	1		İ					
	2011 estimated tax payments and 2010 overpayment credited to 2011	6b	+							
	exempt foreign organizations - tax withheld at source	6c	 		\dashv					
	Tax paid with application for extension of time to file (Form 8868)	6d	 							
	Backup withholding erroneously withheld Fotal credits and payments. Add lines 6a through 6d	Ou				7				0.
	inter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	chad			ŀ	8	-			<u> </u>
	fax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	icricu				9			1	23.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					10				<u> </u>
	Enter the amount of line 10 to be: Credited to 2012 estimated tax			Refunded		11		_		
	t VII-A Statements Regarding Activities		-	Interdirect			l			
	During the tax year, did the foundation attempt to influence any national, state, or local legis	slation (or did it partic	cipate or inter	vene	ın			Yes	No
	iny political campaign?		-	.,,				1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo:	ses (se	e instruction	s for definitio	n)?			1b		X
	f the answer is "Yes" to 1a or 1b, attach a detailed description of the activities an					d or				
	distributed by the foundation in connection with the activities.		,							
	Did the foundation file Form 1120-POL for this year?							1c		x
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	e vear:								
	1) On the foundation. > \$ 0. (2) On foundation managers		6		0.					
	Enter the reimbursement (if any) paid by the foundation during the year for political expendi			foundation						
	managers. ► \$ 0.		•							
2	Has the foundation engaged in any activities that have not previously been reported to the II	RS?						2		X
	f "Yes," attach a detailed description of the activities.									
3	Has the foundation made any changes, not previously reported to the IRS, in its governing i	ınstrun	nent, articles	of incorporat	ion, o	r				
	oylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	es						3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the yea	ar?						4a		X
b	f "Yes," has it filed a tax return on Form 990-T for this year?					N	/A	4b		
5	Nas there a liquidation, termination, dissolution, or substantial contraction during the year $ ilde{r}$	7						5		_X_
	f "Yes," attach the statement required by General Instruction T.									
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	ither:								
	By language in the governing instrument, or									
	By state legislation that effectively amends the governing instrument so that no mandator	ry direc	tions that co	nflict with the	state	law				
	remain in the governing instrument?							6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year?							7	X	
	f "Yes," complete Part II, col. (c), and Part XV.									
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ons) 🕨	NON NON	E						
	·									
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorne	y General (or	designate)					77	
	of each state as required by General Instruction G? If "No," attach explanation		10.10(.)(6)	4040434=55				_8b_	_X	
	Is the foundation claiming status as a private operating foundation within the meaning of se		-		r cale	ndar				77
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," o							9		X
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedu	ule listin	g their names a	nd addresses			r	<u>10</u> n 990		2011\
							Forr	コンプ	-rr(ZU (1)

THE DAVID W. KNAPP CHARITABLE FOUNDATION C/O FIRST NIAGARA PRIVATE CLIENT SERVICE 06-1489095 Form 990-PF (2011) Page 5 Part 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 X 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disgualified person had advisory privileges? If "Yes," attach statement (see instructions) 12 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A 14 The books are in care of ► 1ST NIAGARA PRIVATE CLIENT SERVICES Telephone no. ► 203-789-2779 Located at ▶ 195 CHURCH STREET, NEW HAVEN, CT ZIP+4 ▶06510 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in Ikeu of Form 1041 - Check here N/A and enter the amount of tax-exempt interest received or accrued during the year 15 16 At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank. Yes No 16 X securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required No Yes File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year did the foundation (either directly or indirectly): Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after Yes X No termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations 1b section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected X before the first day of the tax year beginning in 2011? 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)): a At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning Yes X No before 2011? If "Yes," list the years b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach N/A statement - see instructions.) 2b c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2011.)

had not been removed from jeopardy before the first day of the tax year beginning in 2011?

b If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

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X

3b

4a

Yes X No

N/A

during the year?

C/O FIRST NIAGARA PRIVATE CLIENT SERVICE 06-1489095 Form 990-PF (2011) Page 6 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: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? 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)? N/A 5b 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 N/A Yes No expenditure responsibility for the grant? 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 Yes X No a personal benefit contract? 6b X b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b. file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (e) Expense account, other (If not paid, (a) Name and address enter -0-) allowances FIRST NIAGARA PRIVATE CLIENT SERVICESTRUSTEE 195 CHURCH STREET NEW HAVEN, CT 06510 1.00 0 0. 0. TRUSTEE DAVID W KNAPP 65 WATER ST 0 2.00 0. GUILFORD, CT 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (b) Title, and average hours per week devoted to position (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other (c) Compensation (a) Name and address of each employee paid more than \$50,000 allowances NONE

.THE DAVID W. KNAPP CHARITABLE FOUNDATION

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

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<u>orm 990-PF (</u>	2011)	<u> </u>	FIRST	NIAGARA	PRIVATE	CLIENT _	SERVICE	
Part VIII	Inform	ation .	About Off	icers, Direct	ors, Trustee	s, Foundat	ion Managers,	High

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3 Five highest-paid independent contractors for professional services. If none, enter	er "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		>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant stati	stical information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers pro		Expenses
1 N/A		
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 of	n lines 1 and 2.	Amount
1 N/A		
1		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	>	0.

C/O FIRST NIAGARA PRIVATE CLIENT SERVICE Form 990-PF (2011) Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Part X Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 294,013. a Average monthly fair market value of securities 1a 224,697. 1b Average of monthly cash balances c Fair market value of all other assets 1c 518,710. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 518,710. 3 Subtract line 2 from line 1d 7,781. 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 510,929. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 25,546. Minimum investment return Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain Part XI foreign organizations check here \blacktriangleright and do not complete this part.) 25,546. Minimum investment return from Part X, line 6 123. Tax on investment income for 2011 from Part VI, line 5 Income tax for 2011. (This does not include the tax from Part VI.) 2c Add lines 2a and 2b 3 Distributable amount before adjustments. Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 4 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 25,163. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a **b** Program-related investments - total from Part IX-B 1b

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes

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

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

Amounts set aside for specific charitable projects that satisfy the:

Adjusted qualifying distributions. Subtract line 5 from line 4

a Suitability test (prior IRS approval required)

income. Enter 1% of Part I, line 27b

Cash distribution test (attach the required schedule)

4940(e) reduction of tax in those years.

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

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25,163.

2

3a 3Ь

4

6

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Undistributed Income (see instructions) (c) (d) (a) (b) 2010 Corpus Years prior to 2010 2011 1 Distributable amount for 2011 from Part XI, 25,423. 2 Undistributed income, if any, as of the end of 2011 0. a Enter amount for 2010 only b Total for prior years: 0. 3 Excess distributions carryover, if any, to 2011: 376. a From 2006 **b** From 2007 20,169. c From 2008 d From 2009 e From 2010 20,545 f Total of lines 3a through e 4 Qualifying distributions for 2011 from Part XII, line 4: ►\$ 25,163. 0 a Applied to 2010, but not more than line 2a **b** Applied to undistributed income of prior 0 years (Election required - see instructions) c Treated as distributions out of corpus 0 (Election required - see instructions) 25,163. d Applied to 2011 distributable amount 0 e Remaining amount distributed out of corpus 260. 260. Excess distributions carryover applied to 2011 (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: 20,285 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract 0 line 4b from line 2b 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 0 assessed d Subtract line 6c from line 6b. Taxable 0 amount - see instructions e Undistributed income for 2010. Subtract line 0. 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2011. Subtract lines 4d and 5 from line 1. This amount must 0. be distributed in 2012 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by 0. section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2006 116. not applied on line 5 or line 7 9 Excess distributions carryover to 2012. 20,169. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2007 20,169. b Excess from 2008 c Excess from 2009 d Excess from 2010 e Excess from 2011

THE DAVID W. KNAPP CHARITABLE FOUNDATION C/O FIRST NIAGARA PRIVATE CLIENT SERVICE

Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling 4942(j)(3) or 4942(j)(5) b Check box to indicate whether the foundation is a private operating foundation described in section Tax year Prior 3 years 2 a Enter the lesser of the adjusted net (a) 2011 (b) 2010 (c) 2009 (d) 2008 (e) Total income from Part I or the minimum 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 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 Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) DAVID W KNAPP b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here \(\sum \textbf{X} \) if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. 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:

06-1489095

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Form 990-PF (2011)

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation status of Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year AMFAR AIDS RESEARCH 501C3 DONATION 559. 501C3 DONATION CENTRAL ASIA INSTITUTE 1,119. BECKET-CHIMNEY CORNERS YMCA 501C3 LEGACY GIFT 559. BECKET MA 501C3 DONATION CHRISTIAN COMMUNITY ACTION AGENCY 559<u>.</u> COLUMBUS HOUSE 501C3 DONATION <u>559.</u> SEE CONTINUATION SHEET(S) Total ➤ 3a 25 163 **b** Approved for future payment NONE Tota!

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income	Excluded t	by section 512, 513, or 514	(0)
•	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		- Wde		
a	 		+ +		
b		·	 		
<u> </u>	 		 		
d			 		
e					
Topo and contracts from accomment accommen			+ +		
g Fees and contracts from government agencies	 				
2 Membership dues and assessments			 		
3 Interest on savings and temporary cash			14	49.	
Investments			14	10,357.	
4 Dividends and interest from securities			 14 -	10,357.	
5 Net rental income or (loss) from real estate:	-		 		<u> </u>
a Debt-financed property			 		
b Not debt-financed property	 				·
6 Net rental income or (loss) from personal					
property					
7 Other investment income		 	+		
8 Gain or (loss) from sales of assets other					
than inventory			 		
9 Net income or (loss) from special events	<u> </u>		 		
10 Gross profit or (loss) from sales of inventory			 		
11 Other revenue:				ļ	
a			-		<u> </u>
b			 		
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.	,	10,406.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	10,406.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accor	nplishment of E	xempt P	urposes	
Line No. Explain below how each activity for which income the foundation's exempt purposes (other than			A contribute	d importantly to the accomp	olishment of
					· ·
					···
					<u></u>
-					
					
			.		
					
					·
	<u>-</u> .				
					
					
					
		. <u>–</u>			

THE DAVID W. KNAPP CHARITABLE FOUNDATION

Form 990-PF (2011)

C/O FIRST NIAGARA PRIVATE CLIENT SERVICE

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v	u –		**	u	J	v	2	J	

Page 13

Part XVII	Information Regarding T	ransfers To and	Fransactions and Relationship	s With Noncharitable
,	Exempt Organizations			

		rectly engage in any of the followin)(3) organizations) or in section 52			on 501(c) of		Yes	No
		ation to a noncharitable exempt or		izations.				
(1)	• •	then to a noncharlable exempt or	gamzation or.			1a(1)		х
• •	Other assets					1a(2)		X
	transactions:					1.01.27		
	Sales of assets to a noncharital	ble exempt organization				1b(1)		_x
		ncharitable exempt organization				1b(2)		X
٠,	Rental of facilities, equipment,	. •				1b(3)		X
` '	Reimbursement arrangements					1b(4)		X
٠,	oans or loan guarantees		•			1b(5)		X
` '	· ·	mbership or fundraising solicitation	ons			1b(6)		X
٠,		aling lists, other assets, or paid em				1c		X
		"Yes," complete the following sche	• •	ways show the fair m	arket value of the god	ds, other asse	ets,	
		oundation. If the foundation receive	, ,	-	_		•	
		other assets, or services received.						
a) Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description	of transfers, transactions,	and sharing arra	angeme	nts
	· · · · · · · · · · · · · · · · · · ·	N/A	·					
		·						
2a Is the	foundation directly or indirec	tly affiliated with, or related to, one	or more tax-exempt organi	zations described				
ın se	ction 501(c) of the Code (other	r than section 501(c)(3)) or in sect	tion 527?			Yes	X	No
b If "Ye	s," complete the following sch	edule.	· ··-					
	(a) Name of org	janization	(b) Type of organization	(0	c) Description of relat	ionship		
	N/A							
		 .				_ .		
		that I have examined this return, includir mplete. Declaration of preparer (other that				May the IRS d		
Sign	FIRST WASA	24 BANK	ا د اد		_	return with the shown below (prepar see ins	er tr)?
Here	BY:	1/4/	582012		- LISERIAEMA	X Yes	L	No
	Signature of official or it ustee	FIRST WOF TRESIDE		Title			•	
	Print/Type preparer's na	\	ignature	/ /		TIN		
	KATHLEEN S	HELD,	4 SILIATOR	5/1/12	self- employed			
Paid	CPA	1/min	MU TOUR	01110		P00638		
Prepar		IIONE MACCA'& LA	RROW, LLP		Firm's EIN ► 06	-15860'	75	
Use O	<u> </u>							
		.30 WHITNEY AVEN	IUE					
	HA	MDEN, CT 06518			Phone no. 20	<u>3-281-</u>		
						Form 990	-PF(2011)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

2011

Employer identification number

THE DAVID W. KNAPP CHARITABLE FOUNDATION 06-1489095 C/O FIRST NIAGARA PRIVATE CLIENT SERVICE Organization type (check one). Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

religious, charitable, etc., contributions of \$5,000 or more during the year.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization
THE DAVID W. KNAPP CHARITABLE FOUNDATION

C/O FIRST NIAGARA PRIVATE CLIENT SERVICE

Employer identification number

06-1489095

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed.

raiti	Continuators (see instructions) ose duplicate copies of Part I il addition	onal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DAVID KNAPP CHARITABLE LEAD TRUST 195 CHURCH STREET NEW HAVEN, CT 06510	\$ 41,410.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Omnicash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		*	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		_ _	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

THE DAVID W. KNAPP CHARITABLE FOUNDATION C/O FIRST NIAGARA PRIVATE CLIENT SERVICE

06-1489095

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed.

	Noncash Property (see instructions) Use duplicate copies of Part	. Il il additional space is fieeded.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	63 SHARES JOHNSON & JOHNSON INC.		
		\$\$	12/15/11
(a) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
 !			
(a) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. rom art i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	

Name of organization

Employer identification number

THE	DAVID	W.	KNAPP	CHARITABLE	FOUNDATION

/O FII	RST NIAGARA PRIVATE CL Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the	ridual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the scompleting Part III, enter
	the total of exclusively religious, charitable, etc		the year. (Enter this information once)
a) Nia	Use duplicate copies of Part III if additional	ai space is needed	·
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
		(e) Transfer of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(a) Transfer of gift	
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee				

THE DAVID W. KNAPP CHARITABLE FOUNDATION

C/O FIRST NIAGARA PRIVATE CLIENT SERVICE 06-1489095

Part XV | Supplementary Information

3 Grants and Contributions Paid During the Yo				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
name and address (nome or business)	or substantial contributor	recipient		
CONN AIDS RESOURCE COALITION		501C3	DONATION	55
CT GAY MEN'S CHORUS		501C3	DONATION	1,11
DOROTHY WHITFIELD HISTORICAL SOCIETY		501C3	DONATION	55
EASTON MOUNTAIN		501C3	DONATION	1,11
FERRY BEACH PARK ASSOC		501C3	SCHOLARSHIPS	55
FIRST CHURCH OF GUILFORD		501C3	MINISTER'S GIFT	
GUILFORD, CT				1,11
GAY MENS HEALTH CRISIS FOUNDATION		501C3	DONATION	55
GLAAD		501C3	DONATION	55
GLAD		501C3	DONATION	
CILLI FORD, ARC		501c3	DOMARITON	55
GUILFORD ABC		55105	DONATION	55
Total from continuation sheets				21_80

THE DAVID W. KNAPP CHARITABLE FOUNDATION

C/O FIRST NIAGARA PRIVATE CLIENT SERVICE 06-1489095

Part XV Supplementary Information

Part XV Supplementary Informatio				
3 Grants and Contributions Paid During the		-		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	_	
GUILFORD EDUCATION FUND		501C3	DONATION	
GUILFORD CT				559
GUILFORD FOUNDATION		501C3	DONATION	559
GUILFORD KEEPING SOCIETY		501C3	DONATION	559,
-				
GUILFORD LAND CONSERVATION TRUST		501C3	DONATION	:
GUILFORD CT	-			559
GUILFORD PRESERVATION ALLIANCE		501C3	DONATION	
GOILFORD FRESERVATION ALLIANCE		Jules	DONATION	
GUILFORD CT				559.
HABITAT FOR HUMANITY		501C3	DONATION	
				559_
HOLDEN VILLAGE		501C3	DONATION	
		-		559.
IN THE LIFE		501C3	DONATION	
				559.
INSTITUTE FOR WELCOMING RESOURCES		501C3	DONATION	
		50103	CONTION	559.
MISSIONARY SOCIETY OF CT		501C3	DONATION	1,119,
Total from continuation sheets				

THE DAVID W. KNAPP CHARITABLE FOUNDATION C/O FIRST NIAGARA PRIVATE CLIENT SERVICE

06-1489095

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount any foundation manager status of Name and address (home or business) or substantial contributor recipient MISSIONARY SOCIETY OF CT 501C3 FUND RAISER 559. 501C3 DONATION NEW HAVEN PRIDE CENTER 1,119. NEW HAVEN CT 501C3 POINT FOUNDATION DONATION 559. 501C3 NOITANO SCHOONER INC NEW HAVEN 559. SHORELINE GREENWAY TRAIL 501C3 DONATION 559. SOUNDVIEW YMCA CAPITAL FUND 501C3 DONATION <u>559.</u> 501C3 DONATION SOUTHERN POVERTY LAW CENTER 559. TRUE COLORS 501C3 DONATION 1,119. UCC COALITION 501C3 DONATION 1,119. WOMEN AND FAMILY LIFE 501C3 DONATION <u>559.</u> Total from continuation sheets

THE DAVID W. KNAPP CHARITABLE FOUNDATION
C/O FIRST NIAGARA PRIVATE CLIENT SERVICE 06-1489095

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Ye	ear (Continuation)			
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
o. a		F0103	DOWNWYOU	
GLSEN	NONE	501C3	DONATION	559.
	l.o.	E0103	DOMESTON	
BRANFORD TROLLEY MUSEUM	NONE	501C3	DONATION	559.
		•		
	1			
		•		
			_	
Total from continuation sheets	L			

FORM 990-PF INTEREST ON SAVI	NGS AND TE	MPORARY CASH I	NVESTMENTS	STATEMENT 1
SOURCE				AMOUNT
FIRST NIAGARA PRIVATE CLIENT	SERVICES			49.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	OLUMN A		49.
FORM 990-PF DIVIDEND	S AND INTE	REST FROM SECU	RITIES	STATEMENT 2
SOURCE	GROS		ITAL GAINS IVIDENDS	COLUMN (A) AMOUNT
DOMESTIC DIVIDENDS		10,357.	0.	10,357.
TOTAL TO FM 990-PF, PART I, I	N 4	10,357.	0.	10,357.
FORM 990-PF	ACCOUNT	ING FEES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
ACCOUNTING	1,125	. 1,125.	•	0. 0.
TO FORM 990-PF, PG 1, LN 16B	1,125	1,125.		0.
FORM 990-PF C	THER PROFE	SSIONAL FEES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOM	
INVESTMENT MANAGEMENT FEES	2,945	2,945.		0. 0.
TO FORM 990-PF, PG 1, LN 16C	2,945	. 2,945.		0. 0.

FORM 990-PF	TAX	ES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES' MENT INCO			
EXCISE TAX	165.	1	65.	0.	0.
TO FORM 990-PF, PG 1, LN 18	165.	1	65.	0.	0.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT	6
DESCRIPTION			BOOK VALUE	FAIR MARKET	
CORPORATE STOCK		_	221,020.	305,5	37.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B	=	221,020.	305,53	37.
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT	7
DESCRIPTION		LUATION ETHOD	BOOK VALUE	FAIR MARKE' VALUE	Г
FEDERATED GOV OBL TX-MGD		COST	236,837.	236,83	37.
TOTAL TO FORM 990-PF, PART I	I, LINE 13		236,837.	236,83	37.