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Department of the Treasury Internal Revenue Service

OMB No 1545-0052

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

	alendar year 2011				-		, 2011	, and end	ing		, 20
	e of foundation THE		CHAEL F.	. & JC	AN G	. HOBEN			4	Employer identif	
FAM	ILY FOUNDAT	ON								10-60012	
Num	ber and street (or P C	box n	umber if mail is	not delive	red to st	reet address)		Room/su	ute (per (see instructions)
									1	(2)	03) 929-3535
	AST TRAIL										
City	or town, state, and Z	IP code	•								
									١٩	If exemption applic pending, check her	eation is
DAF	RIEN, CT 0682	20				<u> </u>					
Ch	eck all that apply:		Initial retui		<u> </u> _		of a former p	oublic cha	rity	1. Foreign organizi	ations, check here
		Щ	Final retur			_ Amended re				2. Foreign organiz 65% test, check	
		لــــــــــــــــــــــــــــــــــــــ	Address c			Name chan					
$\overline{}$	eck type of organiz		_	-						If private foundate	on status was terminated
	Section 4947(a)(1) n					ther taxable p				under section 507(b)(1)(A), check here . 🕨 📖
-	r market value of a				_	method: X	Cash Acc	crual	F		n a 60-month termination
	year (from Part II, c		line 436.			pecify) n (d) must be o	n oach bosis			under section 507(b)(1)(B), check here .
	▶ \$				Coluin	ii (u) iiiust b e u	Ti casti basis)	<u>'</u>	1		(d) Diphyroomenta
e di N	Analysis of Rev	enue <i>columi</i>	and Expens ns (b), (c), an	565 (ING d (d)		Revenue and	(b) Net inv	estment	(c)	Adjusted net	(d) Disbursements for charitable
	may not necessar	ly equa	al the amount		e	xpenses per books	incor	ne		ıncome	purposes
_	column (a) (see ins					9,982	}				(cash basis only)
1	Contributions, gifts, grant	founda	ation is not req	uired to		3,332	 				
3	Check ▶ attac		B , , , , .				 				<u> </u>
4	Dividends and inte	-	-			851		851.			ATCH 1
5 a						***	 				111011 1
	Gross rents Net rental income or (
	Net gain or (loss) from		f pesets not on	line 10			<u> </u>				
	Gross sales price for a		1 233613 1101 011	1110 10							· · · · · · · · · · · · · · · · · · ·
7	assets on line 6a Capital gain net ind	come (f	from Part IV	line 2)			1				
8	Net short-term=cap	•			51		 				
9	Income modification	ns R	CEME	\mathbb{D}							
	Gross sales less return	•									
E	Less: Cost of goods so	A A A DIK	√ ୭ 1 2 0	42 K	61						
	Gross profit or (ios	19(7≒7) (attac	ch schedule)	g	6						
11	Other income (atta	ch.sch	edule)	<u>0</u>							
12	Total, Add lines 1 t	hrouat				10,833	+	851.			
13	Compensation of office	ers, dire	octors, trustees	, etc .	2		q				ļ
14	Other employee sa										
15 16a b 17 18 19 20	Pension plans, em					· · · · · · · · · · · · · · · · · · ·	 				
16a		chedul	le) <u></u> .			000	ļ				
6	Accounting fees (a					900	<u> </u>	900.			
c	Other professional	•					 				
17	Interest				-	38					
18	Taxes (attach schedule					36	1				<u> </u>
19	Depreciation (attac		•				 				<u> </u>
20	Occupancy			- 1			 				<u> </u>
21	Travel, conferences		_			·	 				
22	Printing and public Other expenses (at					469		469.			
23	Total operating an										
[["	Add lines 13 through					1,407		1,369.			
23 24 25	Contributions, gifts	•				2,500		-,			2,500
26	Total expenses and disb	_				3,907		1,369.			2,500
27	Subtract line 26 fro			- GIU 23		-,	† · · · · · · · · · · · · · · · · · · ·	1			
	Excess of revenue over (ents		6,926					
	Net investment inc	-		1		· · · · · · · · ·	†	0			
]	Adjusted not income	•	•				1				

For Paperwork Reduction Act Notice, see instructions. E1410 1 000 CQB1UC K276

ATCH 3

Form 990-PF (2019)

D	art II	Balance Sheets description column should be for end-of-year	Beginning of year	Ena o	year
		amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
-	2	Savings and temporary cash investments	3,159.	116.	116.
1	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			•
- 1	Ť	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	•	Less: allowance for doubtful accounts			
	8	·			· · · · · · · · · · · · · · · · · · ·
Assets	_	Inventories for sale or use		·	
88	9	Prepaid expenses and deferred charges		• • •	
A	10 a	Investments - U S and state government obligations (attach schedule)	9,855.	18,956.	55,320.
	b	Investments - corporate stock (attach schedule) ATCH 5.	9,000.	10, 930.	33,320
	11 C	Investments - corporate bonds (attach schedule),	· · · · · · · · · · · · · · · · · · ·		
	• •	and equipment basis			
		Less accumulated depreciation (attach schedule)			·
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule) Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) 7,500.			
	14	Land, buildings, and equipment basis	l .		
		Less accumulated depreciation 7,500.			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
		Instructions. Also, see page 1, item I)	13,014.	19,072.	55,436.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
8	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable (attach schedule)			
2	22	Other liabilities (describe			
	22	Other habilities (describe			
	23	Total liabilities (add lines 17 through 22)	l	d	
-	23		=		
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
S		-	l l		
õ	24	Unrestricted			
直	25 26 27 28 29 30 31	Temporarily restricted			
ä	26	Permanently restricted			
핕		Foundations that do not follow SFAS 117,			
ヹ		check here and complete lines 27 through 31. ▶ X			
ō	27	Capital stock, trust principal, or current funds			
ş	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
883	29	Retained earnings, accumulated income, endowment, or other funds	13,014.	19,072.	
î A	30	Total net assets or fund balances (see instructions)	13,014.	19,072.	
ž	31	Total liabilities and net assets/fund balances (see			
		ınstructions)	13,014.	19,072.	
Ρ	art II	Analysis of Changes in Net Assets or Fund	Balances		
		net assets or fund balances at beginning of year - Part		nust agree with	
		of-year figure reported on prior year's return)			13,014.
2		r amount from Part I, line 27a		!!!	6,926.
		r increases not included in line 2 (itemize) ▶			
					19,940.
5	Decr	lines 1, 2, and 3 eases not included in line 2 (itemize) ► ATTACH	MENT 6	· · · · · · · · •	868.
		net assets or fund balances at end of year (line 4 minus l			19,072.
<u>. </u>	i Uld	net assets of fund balances at end of year time 4 minus	<u> </u>	<u> </u>	13,012.

Part IV Capital Gains					Page 3
	s and Losses for Tax on inve		T (b) How	(1) 500	· · · · · · · · · · · · · · · · · · ·
	nd describe the kind(s) of property sold (oprick warehouse, or common stock, 200		acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo , day, yr)
1a					
b			ļ		
С			ļ <u></u> .	<u></u>	
_d			ļ	ļ	ļ
<u> </u>	T		ļ	<u> </u>	1
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
_a					
<u>b</u>		· · · · · · · · · · · · · · · · · · ·			
<u> </u>					
<u>_d</u>		~ * . *			
9		4 h	<u> </u>		
Complete only for assets	showing gain in column (h) and owne	i		Gains (Col (h) g (k), but not less t	
(i) F M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col. (j), if any		Losses (from co	
<u>a</u>				·	
_b					· · · · · · · · · · · · · · · · · · ·
<u>C</u>					
<u>d</u>					
_ 0	ı ıf	gain, also enter in Part I, line 7			····
2 Capital gain net income o		(loss), enter -0- in Part I, line 7	2		
3 Net short-term capital gai	יי ہا n or (loss) as defined in sections 12		-		
	int I, line 8, column (c) (see insti				
-			3		
	Under Section 4940(e) for Rec		ncome		
(e section 4940(a) tax on net invest	ment inco	me.)	
		e section 4940(a) tax on net invest	ment inco	me.)	
If section 4940(d)(2) applies	,	e section 4940(a) tax on net invest	ment inco	me.)	
If section 4940(d)(2) applies	,	e section 4940(a) tax on net invest	ment inco	me.) 	
Was the foundation liable for	, leave this part blank r the section 4942 tax on the distrib	outable amount of any year in the b		· 	Yes X No
Was the foundation liable for If "Yes," the foundation does	, leave this part blank the section 4942 tax on the distrib not qualify under section 4940(e).	outable amount of any year in the b Do not complete this part	ase peno	d?	Yes X No
Was the foundation liable for If "Yes," the foundation does 1 Enter the appropriate am	, leave this part blank r the section 4942 tax on the distrib	outable amount of any year in the b Do not complete this part	ase peno	d?	Yes X No
Was the foundation liable for If "Yes," the foundation does	, leave this part blank r the section 4942 tax on the distrib not qualify under section 4940(e). nount in each column for each year (b)	outable amount of any year in the b Do not complete this part ; see the instructions before making (c)	ase peno	d?	
Was the foundation liable for if "Yes," the foundation does 1 Enter the appropriate am (a) Base penod years Calendar year (or tax year beginning in)	, leave this part blank r the section 4942 tax on the distrib not qualify under section 4940(e). nount in each column for each year (b) Adjusted qualifying distributions	outable amount of any year in the b Do not complete this part ; see the instructions before making (c) Net value of nonchantable-use assets	ase peno	d? (d) Distribution re (col (b) divided by	atio col (c))
Was the foundation liable for If "Yes," the foundation does 1 Enter the appropriate am (a) Base penod years Calendar year (or tax year beginning in) 2010	the section 4942 tax on the distribution to qualify under section 4940(e). The section 4942 tax on the distribution to qualify under section 4940(e). The section 4942 tax on the distribution to the section 4940(e). (b) Adjusted qualifying distributions 2,462.	putable amount of any year in the b Do not complete this part ; see the instructions before making (c) Net value of nonchamtable-use assets 41,384.	ase peno	d? (d) Distribution re (col (b) divided by	atio r col (c)) 0 . 0 5 9 4 9 2
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Was the foundation liable for If "Yes," the foundation does 1 Enter the appropriate am (a) Base penod years Calendar year (or tax year beginning in) 2010 2009 2008	the section 4942 tax on the distribution to qualify under section 4940(e). Tourt in each column for each year (b) Adjusted qualifying distributions 2,462. 1,800. 2,550.	outable amount of any year in the b Do not complete this part ; see the instructions before making (c) Net value of noncharitable-use assets 41,384. 35,515. 40,091.	ase peno	d? (d) Distribution re (col (b) divided by	atio (co) (c)) 0.059492 0.050683 0.063605
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Was the foundation liable for If "Yes," the foundation does 1 Enter the appropriate am (a) Base penod years Calendar year (or tax year beginning in) 2010 2009 2008	the section 4942 tax on the distribution to qualify under section 4940(e). Tourt in each column for each year (b) Adjusted qualifying distributions 2,462. 1,800. 2,550.	outable amount of any year in the b Do not complete this part ; see the instructions before making (c) Net value of noncharitable-use assets 41,384. 35,515. 40,091.	ase peno	d? ies (d) Distribution re (col (b) divided by	atio (co) (c)) 0.059492 0.050683 0.063605
Was the foundation liable for If "Yes," the foundation does 1 Enter the appropriate am (a) Base penod years Calendar year (or tax year beginning in) 2010 2009 2008 2007	the section 4942 tax on the distribution and qualify under section 4940(e). The section 4942 tax on the distribution and qualify under section 4940(e). The section 4942 tax on the distribution 4940(e). (b) Adjusted qualifying distributions 2,462. 1,800. 2,550. 2,000.	outable amount of any year in the big Do not complete this part see the instructions before making (c) Net value of noncharitable-use assets 41,384. 35,515. 40,091. 42,146. 34,783.	ase period	d? ies (d) Distribution ra (col (b) divided by	atio (col (c)) 0.059492 0.050683 0.063605 0.047454 0.057499
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Was the foundation liable for if "Yes," the foundation does 1 Enter the appropriate am (a) Base penod years Calendar year (or tax year beginning in) 2010 2009 2008 2007 2006 2 Total of line 1, column (d) 3 Average distribution ratio number of years the foundation of the column o	the section 4942 tax on the distribution and qualify under section 4940(e). Tount in each column for each year (b) Adjusted qualifying distributions 2,462. 1,800. 2,550. 2,000. 2,000. 1,000. 2,000. 2,000. 2,000.	putable amount of any year in the b Do not complete this part see the instructions before making (c) Net value of nonchamable-use assets 41,384. 35,515. 40,091. 42,146. 34,783. The total on line 2 by 5, or by the sthan 5 years m Part X, line 5	ase period any entr	d? ies (d) Distribution re (col (b) divided by	atio 0.059492 0.050683 0.063605 0.047454 0.057499 0.278733 0.055747
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Was the foundation liable for if "Yes," the foundation does 1 Enter the appropriate am (a) Base penod years Catendar year (or tax year beginning in) 2010 2009 2008 2007 2006 2 Total of line 1, column (d) 3 Average distribution ration number of years the foundation of the secondary of the sec	the section 4942 tax on the distribution of qualify under section 4940(e). The section 4942 tax on the distribution of qualify under section 4940(e). The section 4942 tax on the distribution 4940(e). The section	putable amount of any year in the b Do not complete this part ; see the instructions before making (c) Net value of nonchamable-use assets 41,384. 35,515. 40,091. 42,146. 34,783.	ase period any entr	d? ies (d) Distribution re (col (b) divided by	atio (col (c)) 0.059492 0.050683 0.063605 0.047454 0.057499 0.278733 0.055747
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If "Yes," the foundation does 1 Enter the appropriate am (a) Base penod years Catendar year (or tax year beginning in) 2010 2009 2008 2007 2006 2 Total of line 1, column (d 3 Average distribution ratio number of years the foundation of the second of the seco	the section 4942 tax on the distribution of qualify under section 4940(e). The section 4942 tax on the distribution of qualify under section 4940(e). The section 4942 tax on the distribution 4940(e). The section 4940(e)	putable amount of any year in the b Do not complete this part ; see the instructions before making (c) Net value of noncharitable-use assets 41,384. 35,515. 40,091. 42,146. 34,783. In the total on line 2 by 5, or by the sthan 5 years m Part X, line 5	ase period any entr	d? ies (d) Distribution re (col (b) divided by	atio (col (c)) 0.059492 0.050683 0.063605 0.047454 0.057499 0.278733 0.055747
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Was the foundation liable for if "Yes," the foundation does 1 Enter the appropriate am (a) Base penod years Calendar year (or tax year beginning in) 2010 2009 2008 2007 2006 2 Total of line 1, column (d) 3 Average distribution ration number of years the foundation with the foundation of the secondation of the seco	the section 4942 tax on the distribution and qualify under section 4940(e). Tount in each column for each year (b) Adjusted qualifying distributions 2,462. 1,800. 2,550. 2,000. 2,000. 2,000. In the 5-year base period - divide indation has been in existence if less ancharitable-use assets for 2011 from the first income (1% of Part I, line 27b).	putable amount of any year in the b Do not complete this part ; see the instructions before making (c) Net value of nonchamtable-use assets 41,384. 35,515. 40,091. 42,146. 34,783.	ase period any entr	d? (d) Distribution re (col (b) divided by	0.059492 0.059492 0.050683 0.063605 0.047454 0.057499 0.278733 0.055747 50,455. 2,813.

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and addresses

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

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 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names

Enter the states to which the foundation reports or with which it is registered (see instructions)

4a

X

Х

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

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

Form	990-PF (2011) THE MICHAEL E	. & JOAN G.	HOBEN	, 10-	6001275	Page (
Pai	t VII-B . Statements Regarding Activities f	or Which Form 4	720 May Be Requ	i red (continued)		
5 a	During the year did the foundation pay or incur any amount	unt to				
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (section	1 4945(e))?	Yes X N	•	
	(2) Influence the outcome of any specific public ele	=				
	directly or indirectly, any voter registration drive?	•			.	
	(3) Provide a grant to an individual for travel, study, or or					
	(4) Provide a grant to an organization other than a				•	1
	•		<i>-</i>		_	i
	section 509(a)(1), (2), or (3), or section 4940(d)(2)?			. — —	°	İ
	(5) Provide for any purpose other than religious, ci				1 1	
	purposes, or for the prevention of cruelty to children					
þ	If any answer is "Yes" to 5a(1)-(5), did any of the		•	•		
	Regulations section 53.4945 or in a current notice regard	-	•		5b	
	Organizations relying on a current notice regarding disas	iter assistance check h	nere	▶ 🔲		
C	If the answer is "Yes" to question 5a(4), does the	foundation claim ex	cemption from the ta	×		
	because it maintained expenditure responsibility for the g	grant?		. Yes N	o	
	If "Yes," attach the statement required by Regulations see	ction 53 4945-5(d)				
6 a	Did the foundation, during the year, receive any fun	ds, directly or indire	ectly, to pay premium	s		
	on a personal benefit contract?			Yes XN	o	
b	Did the foundation, during the year, pay premiums, dire				6ъ	Х
	If "Yes" to 6b, file Form 8870.	•	•			
7 a	At any time during the tax year, was the foundation a pa	arty to a prohibited tax	shelter transaction?	Yes X N	.	
b	If "Yes," did the foundation receive any proceeds or have	e any net income attri	butable to the transaction		7b	
	t VIII Information About Officers, Directors				oyees,	
=	List all officers, directors, trustees, foundation	managere and their	r companention (eac	inetructione		
<u> </u>		(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense a	ecount
	(a) Name and address	hours per week devoted to position	(if not paid, enter -0-)	employee benefit plans and deferred compensation	other allow	
ΑT	TACHMENT 7		((c	ĺ	C
		·				
2	Compensation of five highest-paid employees	(other than thos	se included on lin	9 1 - see instruct	ions). If non	e, ente
	"NONE."	<u> </u>			·	<u> </u>
) Name and address of each employee paid more than \$50,000	(b) Title, and average	(2) (2	(d) Contributions to employee benefit	(e) Expense a	ccount.
48) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred compensation	other allow	
				Compensation		
	NONE	•	•			
	NONE					
	- kind dan a constant a	<u> </u>				
		+			_	
					•	
	w · · · · · · · · · · · · · · · · · ·	 		<u> </u>		
	<u> </u>	<u> </u>				
	I number of other employees paid over \$50,000					

Form 990-PF (2011) Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) 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 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 chantable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficiaries served, conferences convened, research papers produced, etc. 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 NONE All other program-related investments. See instructions 3 NONE

Form 990-PF (2011)

Total. Add lines 1 through 3.

orm 990-PF (2011) • Page 8 Minimum Investment Return (All domestic foundations must complete this part, Foreign foundations, Part X see instructions.) 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 47,948. b Average of monthly cash balances 3,275. 1 b Fair market value of all other assets (see instructions) 1c d Total (add lines 1a, b, and c) 51,223. 1d Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) _______1e 2 Acquisition indebtedness applicable to line 1 assets 51,223. 3 Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see 768. instructions) 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 50,455. Minimum investment return. Enter 5% of line 5 R 2,523. Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating Part XI foundations and certain foreign organizations check here and do not complete this part.) 2,523. Minimum investment return from Part X, line 6 Tax on investment income for 2011 from Part VI, line 5 2a Income tax for 2011 (This does not include the tax from Part VI) 2b 2,523. Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 2,523. Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, 7 2,523. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 2,500. 1a 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. 2 Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3 b Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 2,500. 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) Adjusted qualifying distributions. Subtract line 5 from line 4 6

Form 990-PF (2011)

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.

Page 9

Pa	rt XIII Undistributed Income (see instru	uctions)		- · · · · · · · · · · · · · · · · · · ·	Page #
		(a)	(b)	(c)	(d)
1	Distributable amount for 2011 from Part XI, line 7	Corpus	Years prior to 2010	2010	2011 2,523.
2	Undistributed income, if any, as of the end of 2011				
_ a	Enter amount for 2010 only				
ь	Total for pnor years 20 09 ,20 08 ,20 07				
3	Excess distributions carryover, if any, to 2011.				
а	From 2006 261.				
ь	From 2007				
С	From 2008 545.				}
đ	From 2009 24.				
0	From 2010	•			
f	Total of lines 3a through e	1,299.			
4	Qualifying distributions for 2011 from Part XII, line 4: ► \$ 2,500.				
а	Applied to 2010, but not more than line 2a				
þ	Applied to undistributed income of prior years (Election required - see instructions)				
C	Treated as distributions out of corpus (Election required - see instructions)				
ď	Applied to 2011 distributable amount				2,500.
9	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2011	23.			23.
6	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,276.			
- -	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
	amount - see instructions			,	
9	Undistributed income for 2010. Subtract line 4a from line 2a. Taxable amount - see instructions				
f	Undistributed income for 2011. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012		-		
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	238.			
9	Excess distributions carryover to 2012.				
	Subtract lines 7 and 8 from line 6a	1,038.			
10	1				
8	Excess from 2007				
b					
C					
d	Excess from 2010				
_	LACO30 HOHI 2017		<u>l</u>		Form 990-PF (2011)

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factors:

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

Page 11

Part XV Supplementary Information (continued)						
3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	ng the Year or Appr	oved for F	Future Payment			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	or substantial contributor	recipient	contribution			
a Paid during the year						
ATTACHMENT 8			1			
			İ			
	İ					
			}			
			1			
		į.				
			i			
			İ			
			İ			
Total	<u>. </u>		D 22	2,500.		
b Approved for future payment		<u></u>	▶ 3a	2,300.		
b Approved for fatare payment						
				İ		
]				
Total			▶ 3b			

Page 12

er gross amounts unless otherwise indicated.		ated business income		y section 512, 513, or 514	(e) Related or exemp
Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
					·
Fees and contracts from government agencies					
Membership dues and assessments					
nterest on savings and temporary cash investments					
Dividends and interest from securities			14	851.	
let rental income or (loss) from real estate:					····
Debt-financed property					
Not debt-financed property		 			
let rental income or (loss) from personal property	-				
Other investment income			 		
let income or (loss) from special events			 		
Gross profit or (loss) from sales of inventory.					
Other revenue: a					
			<u> </u>		
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities	ulations) to the Ac	complishment of Ex	cempt Purp	OS O S	
toubtotal. Add columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities No. Explain below how each activity	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities No. Explain below how each activity	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities No. Explain below how each activity	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities No. Explain below how each activity	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities No. Explain below how each activity	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities No. Explain below how each activity	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities No. Explain below how each activity	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities No. Explain below how each activity	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities No. Explain below how each activity	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities No. Explain below how each activity	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities No. Explain below how each activity	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities No. Explain below how each activity	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities No. Explain below how each activity	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities No. Explain below how each activity	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	ited importantly to

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

		Exempt Org	ganizations							
ŀ	n sect						rganization described 7, relating to political		Yes	No
	_		irtina foundatio	n to a noncharita	able exempt organ	ization of				ĺ
			-					1a(1)		х
								1a(2)		X
		ransactions:					• • • • • • • • • • • • • • • • • • • •	10(2)		
(1) Sal	es of assets to a	noncharitable	exempt organizat	ion			16(1)		Х
ì	2) Pur	chases of assets	from a nonch	aritable exempt o	rganization			1b(2)		X
Ò	3) Re	ntal of facilities, e	quipment, or of	ther assets	, , , , , , , , , , , , , , , , , , ,			1b(3)		Х
Ċ	4) Rei	mbursement arra	angements					1b(4)		Х
(5) Loa	ans or loan guarar	ntees					1b(5)		Х
(6) Per	formance of serv	ices or member	ership or fundras	sing solicitations			1b(6)		Х
c S	Sharing	g of facilities, equ	upment, mailing	g lists, other asse	ets, or paid employ	ees		1 c		Х
d l	f the a	answer to any of	f the above is	"Yes," complete	the following so	hedule. Column (b) should always show	the	fair m	arke
١	/alue o	of the goods, oth	er assets, or s	ervices given by	the reporting for	undation. If the fo	undation received less	than	fair m	arket
١	/alue i	n any transaction	or sharing ar	rangement, show	w in column (d) tl	ne value of the go	ods, other assets, or s	ervice	s rece	sived
(a) Lin	e no	(b) Amount involved	(c) Name	of noncharitable exc	empt organization		ansfers, transactions, and sha	ing arra	ngemer	nts
		N/A				N/A				
							- ·			
				· · · - · · ·				····		
	-				W-74		- 1			
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	+			· · · · · · · · · · · · · · · · · · ·						
				- /						
			 							
c	describ	foundation direct ped in section 501 " complete the fo	(c) of the Code	e (other than sec	or related to, one tion 501(c)(3)) or	or more tax-exe	mpt organizations	Y6	s X] No
		(a) Name of organiz		····	ype of organization		(c) Description of relations	hip		
					-			-		
				4.						
Sign	Under	penalties of perjury, I o	declare that I have e on of preparer other t	examined this return, in the tax payor) is based or	cluding accompanying ad a all information of which p	hedules and statements, a reparer has any knowledge	and to the best of my knowledg	_		
lere	1/	Mush	1/1	Ya	14/12	Sout		discuss parer 1		retum below
	Sign	ature of officer or trust	lee //	Date	′ /	Title	(see instructions	1)7 X] Yes [No.
		Drint/Tune manage	orle name	There are the	eleneture.	· + - · ·				
Paid		Print/Type prepare	ers name	Preparer's	signature	Date	A SOUS CHECK	אודי		
Ргера	$arer^{\mathcal{\mu}}$	POLIER R	FULTON.	LPA Wa	it noun	W ICHT	sell-elliployed I			0
Jse (LLMAN LAMO		ALA	Firm's EIN ▶ 06-13	1083	45	
-3 - (-111 y				, SUITE 488	06404				
		L	SHELTON,	CT		06484	Phone no 203-92	<u> </u>	535	

Form 990-PF (2011)

Schedule B (Form 990, 990-EZ,

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service Schedule of Contributors

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

OMB No 1545-0047

2011

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of the organization Employer identification number THE MICHAEL F. & JOAN G. HOBEN FAMILY FOUNDATION 10-6001275 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 Form 990-PF 501(c)(3) exempt private foundation 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 X 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 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 religious, charitable, etc., contributions of \$5,000 or 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).

JSA

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COBIUC K276

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

V 11-4.4

Name of organization THE MICHAEL F. & JOAN G. HOBEN Employer identification number FAMILY FOUNDATION 10-6001275 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. **Total contributions** Name, address, and ZIP + 4 Type of contribution _ 1 MICHAEL HOBEN Person **Payroll** 5 EAST TRAIL X 9,968. Noncash (Complete Part II if there is DARIEN, CT 06820 a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person **Payroli** Noncash (Complete Part II if there is

a noncash contribution.)

Name of organization THE MICHAEL F. & JOAN G. HOBEN FAMILY FOUNDATION

Employer Identification number 10-6001275

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1_	557 SHS OF GENERAL ELECTRIC		
		\$\$	12/22/2011
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of o	rganization THE MICHAEL F. & JOAN (G. HOBEN	Employer identification number
	FAMILY FOUNDATION		10-6001275
Part lil	that total more than \$1,000 for the year	r. Complete columns (a) ti	• • • •
	For organizations completing Part III, ent contributions of \$1,000 or less for the y Use duplicate copies of Part III if addition	ear. (Enter this information	eligious, charitable, etc., once. See instructions.) ►\$
(a) No.		ai space is liceueu.	
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, and	ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
			
		(e) Transfer of gift	
	Transferee's name, address, and	· -	Relationship of transferor to transferee
			
(a) No.		L	
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, and	ZIP + 4	Relationship of transferor to transferee
			The second secon
			
		 	
(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, and a	ZIP + 4	Relationship of transferor to transferee
	1	1	

ATTACHMENT 1

SECURITIES	
T FROM	
NTERES	
AND I	
DIVIDENDS	
ı	
Η	
PART	
990PF,	
FORM	

NET INVESTMENT INCOME	1. 851.	851.
REVENUE AND EXPENSES PER BOOKS	851	851.
DESCRIPTION	AMERICAN ENTERPRISE INVESTMENT SERV.	TOTAL

-

ATTACHMENT 2

FEES
ACCOUNTING
- H
PART
990PF, PART

CHARITABLE		
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	.006	.006
REVENUE AND EXPENSES PER BOOKS	.006	.006
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

FORM 990PF, PART I - TAXES

REVENUE AND EXPENSES

DESCRIPTION PER BOOKS

FEDERAL TAX 38.

TOTALS 38.

THE MICHAEL F. & JOAN G. HOBEN

ATTACHMENT 4

FORM 990PF, PART I - OTHER EXPENSES

	NET	INVESTMENT	INCOME	14.	455.	169
REVENUE	AND	EXPENSES	PER BOOKS	14.	455.	169
						TOTALS
			DESCRIPTION	POSTAGE	OTHER FEES/SUBSCRIPTIONS	

ATTACHMENT 4

ATTACHMENT 5

STOCK
CORPORATE
) - II
PART
990PF,
ORM

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DESCRIPTION

PRAXAIR GENERAL ELECTRIC

ENDING BOOK VALUE

ENDING FMV

45,433. 55,320.

9,855. 9,101.

18,956.

TOTALS

FORM	990PF.	PART	III	_	OTHER	DECREASES	IN	NET	WORTH	OR	FUND	BALANCES

DESCRIPTION AMOUNT

ADJUST TO COST BASIS ON STOCK CONTR.

868.

TOTAL

868.

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT 7

EXPENSE ACCT AND OTHER ALLOWANCES	0	0	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	0	0	0
COMPENSATION	0	0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE	TRUSTEE	GRAND TOTALS
NAME AND ADDRESS	MICHAEL F. HOBEN 5 EAST TRAIL DARIEN, CT 06820	JOAN G. HOBEN 5 EAST TRAIL DARIEN, CT 06820	

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ONTRIB	
S AND C	
GRANTS	
X	
PART XV	
990PE.	
FORM	

ATTACHMENT 8		AMOUNT	2,500.
AIIB		PURPOSE OF GRANT OR CONTRIBUTION	ETHICS ENDOWNENT
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR	FOUNDATION STATUS OF RECIPIENT	UNRELATED 501 (C) (3)
		RECIPIENT NAME AND ADDRESS	LEHIGH UNIVERSITY 27 MEMORIAL DRIVE WEST BETHLEHEM, PA 18015

2,500.

TOTAL CONTRIBUTIONS PAID

ATTACHMENT 8

Form 4562

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury ➤ See separate instructions. Internal Revenue Service Name(s) shown on return

Attach to your tax return.

OMB No 1545-0172

Attachment Sequence No 179

Identifying number

Form 4562 (2011)

THE MICHAEL F. & JOAN G. HOBEN 10-6001275 Business or activity to which this form relates GENERAL DEPRECIATION Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount (see instructions) Total cost of section 179 property placed in service (see instructions) Threshold cost of section 179 property before reduction in limitation (see instructions) Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1 if zero or less, enter -0- if married filing separately, see matructions (a) Description of property Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 Tentative deduction Enter the smaller of line 5 or line 8 Carryover of disallowed deduction from line 13 of your 2010 Form 4582 10 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 Other depreciation (including ACRS) Part III MACRS Depreciation (Do not include listed property) (See instructions.) MACRS deductions for assets placed in service in tax years beginning before 2011 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here . . . Section B - Assets Placed in Service During 2011 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in service (business/investment use (e) Convention (f) Method (g) Depreciation deduction period only - see instructions) 19a 3-year property b 5-year property 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs S/L 27.5 yrs. ММ S/I h Residential rental property 27 5 yrs мм S/L 39 yrs. MM S/L i Nonresidential real property ММ S/L Section C - Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs. S/L c 40-year 40 yrs. мм S/L Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions. 23 For assets shown above and placed in service during the current year, enter the

portion of the basis attributable to section 263A costs. ISA For Paperwork Reduction Act Notice, see separate instructions.

Forn	1 4562 (2011)	. 1									•				Page
Pa	rt V Listed Pro	perty (Include ent, recreation, o	automobi	les,	certain	othe	r vehi	cies,	certain	com	outers,	and	prope	rty us	ed fo
		ny vehicle for wh			g the st	andaro	d milead	ge rat	e or de	ductina	lease	expense	9. comi	olete ou	nhv 24:
	24b, columns	s (a) through (c) of	Section A, a	all of S	ection B,	and S	ection C	cif app	olicable.						
		Depreciation and												7	
24a	Do you have evidence		T	ent use	e claimed?	Y		No	24b f "					Yes	No
	(a) Type of property (list	(b) Date placed	(c) Business/ investment us	e Cost	(d) or other ba		(e) sis for depr siness/inve		(f) Recovery	Met	g) hod/	Depre	(h) eciation	Elected	(i) d section
	vehicles first)	in service	percentage	Т.			use only		period	Conv	ention	ded	uction	1/9	cost
25	Special depreciation year and used more th										. 25				
26	Property used more to										, = -	1			
				%										Τ	
				%											
			,	%											
27	Property used 50% or	less in a qualified bu		· · · · · · · · · · · · · · · · · · ·											
				%						S/L -				1	
				%						S/L -				1	
			<u> </u>	%						S/L -	-			_	
28	Add amounts in colum	nn (h), lines 25 thro	ugh 27 Ente	r here a	and on line	21, pa	ge 1				. 28	L			
29	Add amounts in colur	nn (I), line 26 Entei							-	• • • •	• • • •	• • • •	. 29	<u> </u>	
C	anlata this spatian for	vehicles weed by			Informa							.,			
emp	nplete this section for ployees, first answer the	venicles used by a cauestions in Section	sole propriet on C to see if v	or, par ou me	tner, or o et an exce	iner "m	nore thar o comple	n 5% 0 etina th	wner," or is section	related	person. e vehicle	ityou p	provided	vehicles	s to you
					(a)		b)	T	(c)		d)		۵)		•
	T-4-1 1 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		.		nide 1	•	ide 2	Ve	hicle 3		icle 4		e) ::cle 5		f) ide 6
30	Total business/investhe year (do not include														
31	Total commuting mile	•	· -						·-··	 -				 	
32		nal (noncommutii								t				 	
	driven		-		ł									•	
33	Total miles driven								-					<u>† </u>	
	30 through 32		T I							L					
34	Was the vehicle			Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	during off-duty hours?			·			<u> </u>								
35	Was the vehicle i				1					ì					
	than 5% owner or rela				ļ							L			
36	is another vehicle	e available for	personal				1			}					
	use?				11		L		<u> </u>	L	İ	<u> </u>	L	L	L., .
		tion C - Questic													
	wer these questions				eption to	comp	eleting S	Section	n B for v	ehicles	used b	y empl	oyees v	vho are	not
	re than 5% owners o								-						No.
37	Do you maintain a												g, by	Yes	No
38	your employees?	written policy state	ement that p	· · ·	 s persona	 aluse	of vehic	des e	xcept cor	 nmutina	by you	 ur empl	ovees?		
	See the instructions for													1	
39	Do you treat all use of	vehicles by employe	es as persona	l use?											
40	Do you provide m	ore than five v	ehicles to y	your e	employees	, obta	in info	rmation	n from	your e	mployee	 s abou	t the		
	use of the vehicles, an														
41	Do you meet the req	ulrements concerni	ing qualified	autom	obile dem	onstra	tion use	? (See	instruction	ons.)					
	Note: If your answer to	37, 38, 39, 40, or 4	11 is "Yes," do	not co	mplete Se	ection E	for the	∞vered	i vehicles.						
Pa	rt VI Amortizati	on	· · · · · · · · · · · · · · · · · · ·		· · · ·										
	(a)		(b)			(c)			(4)		(e)			(6)	
	Description of	costs	Date amortiz begins		Amo		amount		(d) Code sea	tion	Amortiz period		Amortiza	(f) ition for th	us year
4.5	Amostination of cont	Abak basis a d			1		• • • • •				percen				
42	Amortization of costs	mat begins during	g your 2011	tax ye	ear (see i I	nstruct	ions).								
	· · · · · · · · · · · · · · · · · · ·				 						_				
43	Amortization of costs	that hegan before w	Our 2011 tax :	/A2F	L						I				
	Total. Add amounts in					 rt			• • • •		• • • •	43			
					. J .J .Opol	· · · · ·		<u></u>				44			

2011

10-6001275

THE MICHAEL F. & JOAN G. HOBEN

Description of Property

Current-year depreciation Current-year amortization Current-year 179 expense ACRS CRS class class Ę 5.000 Beginning Ending
Accumulated Accumulated Medepreciation depreciation thod Conv Accumulated Accumulated amortization amortization code 7,500. A248 7,500. 7,500. 7,500. Basis for depreciation Basis Reduction 179 exp reduction in basis 3 % Unadjusted Cost or basis 7,500. 7,500. Cost basis Date placed in service 12/18/2001 Date placed in service Less Retired Assets Asset description Asset description GENERAL DEPRECIATION
DEPRECIATION AMORTIZATION Subtotals....Listed Property ORGANIZATION COSTS Less Retired Assets Subtotals TOTALS.

*Assets Retired JSA 1X9024 1 000

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

Internal Revenue	-	► File a	separate a	oplication for each return.						
 If you are 	• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box									
		Additional (Not Automatic) 3-Mo								
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)									
•	•	o file Form 990-T and requesting								
Part I only	Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time									
		-	ips, REMIC	s, and trusts must use F	·					
to file incom		empt organization or other filer, see in	etructions		Enter filer's identify					
Type or	1	CHAEL F. & JOAN G. HOB			Employer identific	zation numbe	r (EIIA) or			
print		FOUNDATION	EN),	X 10-60012	75				
File by the	1	reet, and room or suite no. If a P.O. box	v coo inctrii	tions	<u> </u>					
due date for	1		x, see instruc	ions	Social security nui	mber (SSN)				
filing your	5 EAST									
return See instructions	1 '	or post office, state, and ZIP code For	a foreign ad	dress, see instructions						
		, CT 06820	 							
Enter the Re	turn code f	or the return that this application i	is for (file a	separate application for	each return)	· · · · · · ·	0 4			
										
Application			Return	Application			Return			
ls For			Code	ls For			Code			
Form 990			01	Form 990-T (corporation	on)		07			
Form 990-BL			02	Form 1041-A			08			
Form 990-E2	<u> </u>		01	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)	06	Form 8870			12			
		care of ▶ MICHAEL F. HOB	EN							
Telephone	• No ▶	203 656-3025	F	AX No ▶						
 If the orga 	inization do	es not have an office or place of b	usiness in	the United States, check	this box		▶ 🔲			
• If this is fo	r a Group R	leturn, enter the organizat <u>ion'</u> s fou	ır dıgit Gro	up Exemption Number (G	SEN)	If t	his is			
		eck this box ▶ 🔲 If					tach			
		d EINs of all members the extension								
until_ for the	organizatioi	atic 3-month (6 months for a corposition $08/15$, 2012 , to file the ϵ n's return for		-	•	bove The	extension is			
		ar 20 <u>1 1</u> or								
▶	tax year be	ginning	, 20	, and ending	·	20				
3a if this a	application	is for Form 990-BL, 990-PF, 99	0-T, 4720.	or 6069, enter the te	entative tax less any					
		dits See instructions	,,			3a \$	0			
		is for Form 990-PF, 990-T,	4720, or	6069, enter any refu	undable credits and					
	• •	nents made Include any prior year		•		3Ь\$	0			
		act line 3b from line 3a Include y			ured, by using EFTPS	11				
		Tax Payment System) See instruc		. ,	. , 3 =	3 c \$	0			
		ng to make an electronic fund w		with this Form 8868. s	see Form 8453-EO a					
payment inst		-								
		work Reduction Act Notice, see Instru	uctions.			Form 8868	(Rev 1-2012)			