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Form 990-PF

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

OMB No 1545-0052

2011

Department of the Treasury Internal Revenue Service

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

For calendar year 2011, or tax year beginning 01-01-2011, and ending 12-31-2011

Check all that apply: Initial return, Amended return, Initial return of a former public charity, Address change, Final return, Name change

Name of foundation: STARITCH FOUNDATION INC. Employer identification number: 14-1827670. Telephone number: (518) 891-9797. City: SARANAC LAKE, NY 129837355. Accounting method: Accrual. Fair market value: \$1,246,342.

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))

Table with 5 columns: (a) Revenue and expenses per books, (b) Net investment income, (c) Adjusted net income, (d) Disbursements for charitable purposes. Rows include Revenue (1-12), Operating and Administrative Expenses (13-26), and Summary (27-29).

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

<b>Part II Balance Sheets</b>		Beginning of year		End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	-31,125	-18,776	-18,776	
	<b>2</b> Savings and temporary cash investments . . . . .	259,144	60,057	60,057	
	<b>3</b> Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____				
	<b>4</b> Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____				
	<b>5</b> Grants receivable . . . . .				
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions) . . . . .				
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____				
	<b>8</b> Inventories for sale or use . . . . .				
	<b>9</b> Prepaid expenses and deferred charges . . . . .				
	<b>10a</b> Investments—U S and state government obligations (attach schedule)				
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	530,715 <input checked="" type="checkbox"/>	757,198	935,783	
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .	51,839			
	<b>11</b> Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
	<b>12</b> Investments—mortgage loans . . . . .				
	<b>13</b> Investments—other (attach schedule) . . . . .	60,273 <input checked="" type="checkbox"/>	43,821	269,278	
	<b>14</b> Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
<b>15</b> Other assets (describe ▶ _____)					
<b>16 Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	870,846	842,300	1,246,342		
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .				
	<b>18</b> Grants payable . . . . .	8,000			
	<b>19</b> Deferred revenue . . . . .				
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons				
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .				
<b>22</b> Other liabilities (describe ▶ _____)					
<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	8,000	0			
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	<b>24</b> Unrestricted . . . . .				
	<b>25</b> Temporarily restricted . . . . .				
	<b>26</b> Permanently restricted . . . . .				
	<b>Foundations that do not follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>				
	<b>27</b> Capital stock, trust principal, or current funds . . . . .	0	0		
	<b>28</b> Paid-in or capital surplus, or land, bldg, and equipment fund	0	0		
<b>29</b> Retained earnings, accumulated income, endowment, or other funds	862,846	842,300			
<b>30 Total net assets or fund balances</b> (see page 17 of the instructions) . . . . .	862,846	842,300			
<b>31 Total liabilities and net assets/fund balances</b> (see page 17 of the instructions) . . . . .	870,846	842,300			

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b>	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	862,846
<b>2</b>	Enter amount from Part I, line 27a . . . . .	<b>2</b>	-20,546
<b>3</b>	Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	0
<b>4</b>	Add lines 1, 2, and 3 . . . . .	<b>4</b>	842,300
<b>5</b>	Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	0
<b>6</b>	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	<b>6</b>	842,300

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
<b>1a</b>	See Additional Data Table			
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
<b>a</b>	See Additional Data Table			
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		
<b>a</b>	See Additional Data Table			
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
<b>2</b>	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	<b>2</b>	-3,966
<b>3</b>	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8		}	<b>3</b>

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries


(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2010	119,550	1,160,193	0.103043
2009	149,178	834,817	0.178695
2008	111,750	1,234,084	0.090553
2007	118,100	1,453,529	0.081251
2006	189,140	1,207,534	0.156633
<b>2</b>	<b>Total</b> of line 1, column (d).		<b>2</b> 0.610175
<b>3</b>	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years.		<b>3</b> 0.122035
<b>4</b>	Enter the net value of noncharitable-use assets for 2011 from Part X, line 5.		<b>4</b> 1,288,957
<b>5</b>	Multiply line 4 by line 3.		<b>5</b> 157,298
<b>6</b>	Enter 1% of net investment income (1% of Part I, line 27b).		<b>6</b> 96
<b>7</b>	Add lines 5 and 6.		<b>7</b> 157,394
<b>8</b>	Enter qualifying distributions from Part XII, line 4.		<b>8</b> 138,450

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	192
<b>c</b>	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	192
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, enter -0- . . . . .	<b>5</b>	192
<b>6</b>	Credits/Payments		
<b>a</b>	2011 estimated tax payments and 2010 overpayment credited to 2011	<b>6a</b>	1,860
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868)	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments Add lines 6a through 6d. . . . .	<b>7</b>	1,860
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	<b>10</b>	1,668
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2012 estimated tax</b> 1,668 <b>Refunded</b>	<b>11</b>	0

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? . . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>		No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .		No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year <b>(1)</b> On the foundation <input type="checkbox"/> \$ 0 <b>(2)</b> On foundation managers <input type="checkbox"/> \$ 0		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities.</i>		No
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .		No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .		No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .		
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T.</i>		No
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .		No
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	Yes	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) <input type="checkbox"/> NY		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation .</i>	Yes	
<b>9</b> 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 on page 27)? <i>If "Yes," complete Part XIV</i> . . . . .		No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> 	Yes	

**Part VII-A Statements Regarding Activities (continued)**

<b>11</b> 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 page 20 of the instructions). . . . .	<b>11</b>		<b>No</b>
<b>12</b> Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	<b>12</b>		<b>No</b>
<b>13</b> Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>N/A</b>	<b>13</b>	<b>Yes</b>	
<b>14</b> The books are in care of <b>WILLIAM A SWEENEY CPA</b> Telephone no <b>(518) 891-9797</b> Located at <b>440 BLOOMINGDALE AVE SARANAC LAKE NY</b> ZIP+4 <b>12983</b>			
<b>15</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . <b>15</b>			<input type="checkbox"/>
<b>16</b> At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . .	<b>16</b>	<input type="checkbox"/>	<input type="checkbox"/>
See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes", enter the name of the foreign country <b>N/A</b>			

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
<b>1a</b> During the year did the foundation (either directly or indirectly)				
<b>(1)</b> Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>(2)</b> Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>(3)</b> Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>(4)</b> Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>(5)</b> Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>(6)</b> Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>b</b> If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? . . . Organizations relying on a current notice regarding disaster assistance check here. . . . . <input type="checkbox"/>	<b>1b</b>			
<b>c</b> Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011? . . . . .	<b>1c</b>			<b>No</b>
<b>2</b> 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))				
<b>a</b> 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 before 2011? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>20___, 20___, 20___, 20___</b>				
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see page 20 of the instructions). . . . .	<b>2b</b>			
<b>c</b> If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here <b>20___, 20___, 20___, 20___</b>				
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>b</b> If "Yes," did it have excess business holdings in 2011 as a result of <b>(1)</b> any purchase by the foundation or disqualified persons after May 26, 1969, <b>(2)</b> 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 <b>(3)</b> the lapse of the 10-, 15-, or 20-year first phase holding period? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011.</i> ) . . . . .	<b>3b</b>			
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>			<b>No</b>
<b>b</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?	<b>4b</b>			<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

<p><b>5a</b> During the year did the foundation pay or incur any amount to</p> <p><b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions). . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here. . . . . <input type="checkbox"/></p> <p><b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," attach the statement required by Regulations section 53.4945–5(d).</p> <p><b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes" to 6b, file Form 8870.</p> <p><b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>b</b> If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<b>5b</b>	
	<b>6b</b>	<b>No</b>
	<b>7b</b>	

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).**

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

**2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

**3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE".**

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

**Total** number of others receiving over \$50,000 for professional services. . . . . **0**

**Part IX-A Summary of Direct Charitable Activities**

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

	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
<b>1</b> N/A	0
<b>2</b>	
<b>3</b> All other program-related investments. See page 24 of the instructions	

**Total.** Add lines 1 through 3. . . . . **0**

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	1,184,178
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	124,408
<b>c</b>	Fair market value of all other assets (see page 24 of the instructions). . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	1,308,586
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	1,308,586
<b>4</b>	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25 of the instructions). . . . .	<b>4</b>	19,629
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	<b>5</b>	1,288,957
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	64,448

**Part XI Distributable Amount** (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	64,448
<b>2a</b>	Tax on investment income for 2011 from Part VI, line 5. . . . .	<b>2a</b>	192
<b>b</b>	Income tax for 2011 (This does not include the tax from Part VI ). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	192
<b>3</b>	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	<b>3</b>	64,256
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	0
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	64,256
<b>6</b>	Deduction from distributable amount (see page 25 of the instructions). . . . .	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	<b>7</b>	64,256

**Part XII Qualifying Distributions** (see page 25 of the instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
<b>a</b>	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	<b>1a</b>	138,450
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	138,450
<b>5</b>	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 page 26 of the instructions). . . . .	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	138,450

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

**Part XIII Undistributed Income** (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
<b>1</b> Distributable amount for 2011 from Part XI, line 7				64,256
<b>2</b> Undistributed income, if any, as of the end of 2011				
<b>a</b> Enter amount for 2010 only. . . . .			0	
<b>b</b> Total for prior years 20___, 20___, 20___		0		
<b>3</b> Excess distributions carryover, if any, to 2011				
<b>a</b> From 2006. . . . .				132,849
<b>b</b> From 2007. . . . .				50,124
<b>c</b> From 2008. . . . .				50,406
<b>d</b> From 2009. . . . .				108,481
<b>e</b> From 2010. . . . .				63,518
<b>f</b> Total of lines 3a through e. . . . .	405,378			
<b>4</b> Qualifying distributions for 2011 from Part XII, line 4 ▶ \$ 138,450				
<b>a</b> Applied to 2010, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see page 26 of the instructions)		0		
<b>c</b> Treated as distributions out of corpus (Election required—see page 26 of the instructions). . . . .	0			
<b>d</b> Applied to 2011 distributable amount. . . . .				64,256
<b>e</b> Remaining amount distributed out of corpus	74,194			
<b>5</b> Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	479,572			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b. . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions . . . . .		0		
<b>e</b> Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions . . . . .			0	
<b>f</b> Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2011. . . . .				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions). . . . .	0			
<b>8</b> Excess distributions carryover from 2006 not applied on line 5 or line 7 (see page 27 of the instructions). . . . .	132,849			
<b>9</b> Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a. . . . .	346,723			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2007. . . . .				50,124
<b>b</b> Excess from 2008. . . . .				50,406
<b>c</b> Excess from 2009. . . . .				108,481
<b>d</b> Excess from 2010. . . . .				63,518
<b>e</b> Excess from 2011. . . . .				74,194

**Part XIV Private Operating Foundations** (see page 27 of the instructions and Part VII-A, question 9)

**1a** 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. . . . .

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

	Tax year	Prior 3 years			<b>(e) Total</b>
	<b>(a) 2011</b>	<b>(b) 2010</b>	<b>(c) 2009</b>	<b>(d) 2008</b>	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see page 27 of the instructions.)**

**1 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) )

See Additional Data Table

**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

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**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  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 page 28 of the 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

**Part XV Supplementary Information** (continued)

**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b>				<b>3a</b> 138,450
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b>				<b>3b</b> 0





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

**Schedule of Contributors**

OMB No 1545-0047

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

**2011**

Department of the Treasury  
Internal Revenue Service

**Name of organization**  
STARITCH FOUNDATION INC

**Employer identification number**

14-1827670

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—**

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<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. . . . . ▶ \$ \_\_\_\_\_

**Caution.** An Organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box in the heading of its Form 990-EZ, or on 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).

**Name of organization**  
STARITCH FOUNDATION INC

**Employer identification number**

14-1827670

**Part I** Contributors (see Instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
—	See Additional Data Table  <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
—	 <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
—	 <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
—	 <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
—	 <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
—	 <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )

<b>Name of organization</b> STARITCH FOUNDATION INC	<b>Employer identification number</b> 14-1827670
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**Part II** Noncash Property (see Instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	See Additional Data Table	\$ _____	_____
—		\$ _____	_____
—		\$ _____	_____
—		\$ _____	_____
—		\$ _____	_____
—		\$ _____	_____
—		\$ _____	_____
—		\$ _____	_____
—		\$ _____	_____
—		\$ _____	_____
—		\$ _____	_____

**Name of organization**  
STARITCH FOUNDATION INC

**Employer identification number**  
14-1827670

**Part III** *Exclusively* religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (Complete columns (a) through (e) and the following line entry )  
For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc , contributions of **\$1,000 or less** for the year (Enter this information once See instructions ) ▶ \$  
Use duplicate copies of Part III if additional 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, 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 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 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 ZIP 4	Relationship of transferor to transferee
_____ _____	_____ _____ _____

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 14-1827670  
**Name:** STARITCH FOUNDATION INC

**Form 990 Schedule B, Part 1 - Contributors (see instructions)**

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ALEXANDER R VALHOULI C/O WM A SWEENEY CPA PO BOX 1355  SARANAC LAKE, NY 129837355	\$ 10,069	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution )
2	ANDREW DONATELLO C/O WM A SWEENEY CPA PO BOX 1355  SARANAC LAKE, NY 129837355	\$ 1,314	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution )
3	ANNE S RITCHIE HOLUM C/O WM A SWEENEY CPA PO BOX 1355  SARANAC LAKE, NY 129837355	\$ 10,652	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution )
4	CAROLYN R DONATELLO C/O WM A SWEENEY CPA PO BOX 1355  SARANAC LAKE, NY 129837355	\$ 2,694	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution )
5	CHARLES L RITCHIE JR C/O WM A SWEENEY CPA PO BOX 1355  SARANAC LAKE, NY 129837355	\$ 41,114	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution )
6	DOROTHY N RITCHIE-VALHOULI C/O WM A SWEENEY CPA PO BOX 1355  SARANAC LAKE, NY 129837355	\$ 20,252	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution )

## Form 990 Schedule B, Part 1 - Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>7</u>	GEORGE LYFORD C/O WM A SWEENEY CPA PO BOX 1355 SARANAC LAKE, NY 129837355	\$ <u>1,354</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution )
<u>8</u>	JAMES M RITCHIE C/O WM A SWEENEY CPA PO BOX 1355 SARANAC LAKE, NY 129837355	\$ <u>9,830</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution )
<u>9</u>	JAMES R VALHOULI C/O WM A SWEENEY CPA PO BOX 1355 SARANAC LAKE, NY 129837355	\$ <u>6,884</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution )
<u>10</u>	MARY ANNE RITCHIE C/O WM A SWEENEY CPA PO BOX 1355 SARANAC LAKE, NY 129837355	\$ <u>41,114</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution )
<u>11</u>	NICOLE G RITCHIE C/O WM A SWEENEY CPA PO BOX 1355 SARANAC LAKE, NY 129837355	\$ <u>942</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution )
<u>12</u>	ROBERT M HOLUM C/O WM A SWEENEY CPA PO BOX 1355 SARANAC LAKE, NY 129837355	\$ <u>9,303</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution )

Form 990 Schedule B, Part 1 - Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13	ROBERT W DEVORE C/O WM A SWEENEY CPA PO BOX 1355  SARANAC LAKE, NY 129837355  	\$ <u>6,420</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/>  (Complete Part II if there is a noncash contribution )
14	SALLY B RITCHIE C/O WM A SWEENEY CPA PO BOX 1355  SARANAC LAKE, NY 129837355  	\$ <u>10,046</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/>  (Complete Part II if there is a noncash contribution )
15	SOLVEIG A HOLUM C/O WM A SWEENEY CPA PO BOX 1355  SARANAC LAKE, NY 129837355  	\$ <u>5,639</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/>  (Complete Part II if there is a noncash contribution )
16	STEPHEN M RITCHIE C/O WM A SWEENEY CPA PO BOX 1355  SARANAC LAKE, NY 129837355  	\$ <u>3,140</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/>  (Complete Part II if there is a noncash contribution )

## Form 990 Schedule B, Part II - Noncash Property (see instructions):

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>1</u>	52 SH INTERNATIONAL BUSINESS MACHINES	\$ 10,069	2011-12-09
<u>2</u>	200 SH MFC INDUSTRIAL LTD	\$ 1,314	2011-12-22
<u>3</u>	135 SH EXXON MOBIL CORP	\$ 10,652	2011-11-16
<u>4</u>	410 SH MFC INDUSTRIAL LTD	\$ 2,694	2011-12-22
<u>5</u>	25 SH INTUITIVE SURGICAL INC @ \$10,444, 200 SH TELEFLEX @ 11,053 & 250 SH EXXON MOBIL CORP @ 19,617	\$ 41,114	2011-10-20
<u>6</u>	135 SH EXXON MOBIL CORP, @ \$10,726300 SH SILVER WHEATON CORP, @ 9,526	\$ 20,252	2011-11-30
<u>7</u>	200 SH MFC INDUSTRIAL LTD	\$ 1,354	2011-11-21
<u>8</u>	222 SH GOLDCORP INC	\$ 9,830	2011-12-22
<u>9</u>	37 SH INTERNATIONAL BUSINESS MACHINES	\$ 6,884	2011-12-20
<u>10</u>	25 SH INTUITIVE SURGICAL INC @ \$10,444, 200 SH TELEFLEX @ 11,053 & 250 SH EXXON MOBIL CORP @ 19,617	\$ 41,114	2011-10-20
<u>11</u>	150 SH MFC INDUSTRIAL LTD	\$ 942	2011-12-19
<u>12</u>	300 SH WILLIAMS COS	\$ 9,303	2011-11-16
<u>13</u>	100 SH CERNER CORP @ \$6,023 AND 5 SH EXXON MOBIL CORP @ 397	\$ 6,420	2011-11-30
<u>14</u>	345 SH SILVER WHEATON CORP	\$ 10,046	2011-12-22
<u>15</u>	833 SH MFC INDUSTRIAL LTD	\$ 5,639	2011-11-21

Form 990 Schedule B, Part II - Noncash Property (see instructions):

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>16</u>	500 SH MFC INDUSTRIAL LTD	\$ <u>3,140</u>	<u>2011-12-19</u>

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 14-1827670

**Name:** STARITCH FOUNDATION INC

**Form 990PF - Special Condition Description:**

**Special Condition Description**

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

<b>(a)</b> List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	<b>(b)</b> How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
500 SH BAYTEX ENERGY CORP	P	2003-10-07	2011-11-16
1000 SH BP PLC SPONS	P	2011-04-08	2011-10-17
965 SH EXXON MOBIL	D	2009-10-12	2011-04-08
120 SH FRONTIER COMMUNICATIONS	P	2009-02-04	2011-09-27
1880 SH FRONTIER COMMUNICATIONS	P	2010-10-13	2011-09-27
1000 SH FRONTIER COMMUNICATIONS	P	2010-12-10	2011-09-27
9 SH KHD HUMBOLDT WEDAG INT'L	P	2011-01-27	2011-01-27
39 SH LEUCADIA NAT'L CORP	P	2001-04-24	2011-08-25
10000 SH NOBLE GROUP	P	2011-01-21	2011-11-29
4000 SH NORTH AMERICAN PALLADIUM	P	2010-12-14	2011-09-29
6000 SH SPRINT NEXTEL CORP	P	2011-04-19	2011-11-07
2000 SH TETRA TECH INC	P	2011-04-14	2011-09-27
150M WILLIAMS COM GROUP SR NTS (ESCROW)	P	2001-04-24	2011-08-16
I SHARES SILVER TR R-O-C	P		

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	<b>(g)</b> Cost or other basis plus expense of sale	<b>(h)</b> Gain or (loss) (e) plus (f) minus (g)
25,960		3,603	22,357
40,154		47,285	-7,131
82,959		321	82,638
760		902	-142
11,900		15,225	-3,325
6,330		8,836	-2,506
8		8	0
1,082		51,839	-50,757
8,379		17,661	-9,282
15,235		26,045	-10,810
16,860		28,414	-11,554
17,664		31,141	-13,477
23			23
267		267	0

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(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	
			22,357
			-7,131
			82,638
			-142
			-3,325
			-2,506
			0
			-50,757
			-9,282
			-10,810
			-11,554
			-13,477
			23
			0

**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
CHARLES L RITCHIE JR P O BOX 1355 SARANAC LAKE, NY 129837355	PRESIDENT/DIRECTOR 0 00	0	0	0
WILLIAM A SWEENEY P O BOX 1355 SARANAC LAKE, NY 129837355	VICE PRESIDENT 0 00	0	0	0
MARY ANNE RITCHIE P O BOX 1355 SARANAC LAKE, NY 129837355	SECRETARY/DIRECTOR 0 00	0	0	0
JAMES M RITCHIE P O BOX 1355 SARANAC LAKE, NY 129837355	TREASURER/DIRECTOR 0 00	0	0	0
ANNE S RITCHIE HOLUM P O BOX 1355 SARANAC LAKE, NY 129837355	DIRECTOR 0 00	0	0	0
DOROTHY R VALHOULI P O BOX 1355 SARANAC LAKE, NY 129837355	DIRECTOR 0 00	0	0	0
STEPHEN M RITCHIE P O BOX 1355 SARANAC LAKE, NY 129837355	VICE PRESIDENT/ DIRECTOR 0 00	0	0	0
SOLVEIG A HOLUM LYFORD P O BOX 1355 SARANAC LAKE, NY 129837355	DIRECTOR 0 00	0	0	0
CAROLYN R DONATELLO P O BOX 1355 SARANAC LAKE, NY 129837355	DIRECTOR 0 00	0	0	0
JAMES R VALHOULI P O BOX 1355 SARANAC LAKE, NY 129837355	DIRECTOR 0 00	0	0	0
ALEXANDER R VALHOULI P O BOX 1355 SARANAC LAKE, NY 129837355	DIRECTOR 0 00	0	0	0

**Form 990PF Part XV Line 1a - 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).**

CHARLES L RITCHIE JR

MARY ANNE RITCHIE

JAMES M RITCHIE

ANNE S RITCHIE HOLUM

DOROTHY R VALHOULI

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ADIRONDACK CAROUSEL P O BOX 1059 SARANAC LAKE, NY 12983	N/A	PUBLIC CHARITY	SUPPORT THE CAROUSEL PROJECT	2,000
ADIRONDACK COUNCIL P O BOX D-2 ELIZABETH TOWN, NY 12932	N/A	PUBLIC CHARITY	PRESERVATION AND PROTECTION OF ADIRONDACK PARK	2,000
ADIRONDACK EXPLORER 36 CHURCH ST SARANAC LAKE, NY 12983	N/A	PUBLIC CHARITY	PRESERVATION AND PROTECTION OF ADIRONDACK PARK	1,100
ADIRONDACK MEDICAL CENTER P O BOX 471 SARANAC LAKE, NY 12983	N/A	PUBLIC CHARITY	SUPPORT THE COMMUNITY HOSPITAL	4,000
ADIRONDACK MUSEUM P O BOX 99 BLUE MOUNTAIN LAKE, NY 12812	N/A	PUBLIC CHARITY	SUPPORT LOCAL MUSEUM OF THE HISTORY OF THE AREA	500
ADIRONDACK NATURE CONSERVANCY LAND TRUST P O BOX 65 KEENE VALLEY, NY 12943	N/A	PUBLIC CHARITY	PRESERVATION AND PROTECTION OF ADIRONDACK PARK	1,000
AFS-USA INC 198 MADISON AVENUE NEW YORK, NY 10016	N/A	PUBLIC CHARITY	PROMOTE GLOBAL UNDERSTANDING IN THE WORLD	1,000
AMERICAN RED CROSS NORTH COUNTRY CHAPTER 13 GUY WAY PLATTSBURGH, NY 12901	N/A	PUBLIC CHARITY	SUPPORT REGIONAL RELIEF EFFORTS FOR NEEDY FAMILIES	2,200
ASHOKAN FOUNDATION 477 BEAVERKILL ROAD OLIVE BRIDGE, NY 12461	N/A	PUBLIC CHARITY	PROMOTE OUTDOOR EDUCATION PROGRAMS	5,000
BLOOD WATERS MISSION P O BOX 60381 NASHVILLE, TN 37206	N/A	PUBLIC CHARITY	HIV/AIDS AND WATER CRISES IN AFRICA	500
BOWDOIN COLLEGE 4100 COLLEGE STATION BRUNSWICK, ME 04011	N/A	PRIVATE EDUCATION IN	SUPPORT EDUCATIONAL PROGRAMS	500
BURKE MOUNTAIN ACADEMY P O BOX 78 E BURKE, VT 05832	N/A	PRIVATE EDUCATION IN	SUPPORT EDUCATIONAL PROGRAMS	3,500
CARE GIFT CENTER P O BOX 1870 MERRIFIELD, VA 22116 8070	N/A	PUBLIC CHARITY	FIGHTING GLOBAL POVERTY	1,000
CATHOLIC FOUNDATION OF MAINE P O BOX 799 PORTLAND, ME 04013	N/A	PUBLIC CHARITY	MINISTRY	1,500
CHARLIE'S PLACE P O BOX 4996 CORPUS CHRISTI, TX 78469	N/A	PUBLIC CHARITY	ADDICTION TREATMENT	500
CHILDREN'S MUSEUM OF NH P O BOX 654 DOVER, NH 03820 0654	N/A	PUBLIC CHARITY	MUSEUM TO APPEAL TO CHILDREN	2,000
CHURCH OF THE ASCENSION P O BOX 271 LAKE CLEAR, NY 12945	N/A	PUBLIC CHARITY	MINISTRY	3,200
CITY HARVEST 575 EIGHTH AVE 4TH FLOOR NEW YORK, NY 10018	N/A	PUBLIC CHARITY	FEED THE HUNGRY AND HOMELESS	500
CREATIVE HEALING CONNECTIONS P O BOX 545 SARANAC LAKE, NY 12983	N/A	PUBLIC CHARITY	SUPPORT WOMEN W/CANCER & CHRONIC ILLNESS	1,100
DIXON PLACE 161 CHRYSTIE STREET NEW YORK, NY 10002	N/A	PUBLIC CHARITY	PROMOTE THEATRE ARTS	300
DOCTORS WITHOUT BORDERS USA BOX 2247 NEW YORK, NY 10116 2247	N/A	PUBLIC CHARITY	MEDICINE FRONTIERS	500
EPISCOPAL DIVINITY SCHOOL 99 BRATTLE STREET CAMBRIDGE, MA 02138	N/A	PRIVATE EDUCATION IN	SUPPORT EDUCATIONAL PROGRAMS	1,000
EPISCOPAL RELIEF AND DEVELOPMENT P O BOX 7058 MERRIFIELD, VA 22116 7058	N/A	PUBLIC CHARITY	SUPPORT REGIONAL RELIEF EFFORTS FOR NEEDY FAMILIES	1,000
FAMILY CARE INTERNATIONAL 588 BROADWAY NEW YORK, NY 10012	N/A	PUBLIC CHARITY	SAFE MOTHERHOOD AND FAMILY PLANNING INTERNATIONALLY	2,000
HERE ART CENTER 145 SIXTH AVENUE NEW YORK, NY 10013	N/A	PUBLIC CHARITY	PROMOTE ARTS	6,000
HIGH PEAKS HOSPICE P O BOX 840 SARANAC LAKE, NY 12983	N/A	PUBLIC CHARITY	HIGH LEVEL END-OF-LIFE CARE	3,500
INLAND LAKES EDUCATIONAL FOUNDATION 1325 S HAMILTON DRIVE BURT LAKE, MI 49717	N/A	PUBLIC CHARITY	ENVIRONMENTAL WATER ISSUES	3,000
JAY IRENE RELIEF FUND TOWN OF JAY P O BOX 730 AUSABLE FORKS, NY 12912	N/A	MUNICIPAL TOWNSHIP	DISASTER RELIEF HURRICANE IRENE	1,000
KREMPLER FOUNDATION 100 CAMPUS DRIVE PORTSMOUTH, NH 80301	N/A	PUBLIC CHARITY	IMPROVING THE LIVES OF PEOPLE LIVING WITH BRAIN INJURY	1,000
LAKE PLACID CENTER FOR THE ARTS 17 ALGONQUIN DRIVE LAKE PLACID, NY 12946	N/A	PUBLIC CHARITY	SUPPORT THE ARTS	500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
LOVEFUTBOLP O BOX 11056 WASHINGTON,DC 20008	N/A	PUBLIC CHARITY	BUILD SOCCER FIELDS FOR IMPOVERISHED COMMUNITIES	2,000
LUTHERAN PLACE MEMORIAL CHURCH1226 VERMONT AVE NW WASHINGTON,DC 200053615	N/A	PUBLIC CHARITY	SUPPORT VOLUNTEER MINISTRY PROGRAMS	500
LUTHERAN VOLUNTEER CORPS 1226 VERMONT AVE NW WASHINGTON,DC 200053615	N/A	PUBLIC CHARITY	SPIRITUALITY WHILE WORKING FOR SOCIAL JUSTICE	1,500
LUTHERAN WORLD RELIEFP O BOX 17061 BALTIMORE,MD 212989832	N/A	PUBLIC CHARITY	SUPPORT WORLD FAMINE RELEIF	1,000
MARYLAND ENSEMBLE THEATRE 31 WEST PATRICK STREET FREDERICK,MD 21701	N/A	PUBLIC CHARITY	ARTS IN EDUCATION	500
N STREET VILLAGE INC1333 N STREET NW WASHINGTON,DC 20005	N/A	PUBLIC CHARITY	SUPPORT SERVICES FOR THE HOMELESS	1,500
NAMI2107 WILSON BLVD SUITE 300 ARLINGTON,VA 22201	N/A	PUBLIC CHARITY	HELP SUPPORT PEOPLE WITH MENTAL ILLNESS	500
NATIONAL COUNCIL FOR TRADITIONAL ARTS1320 FENWICK LANE STE 200 SILVER SPRINGS,MD 20910	N/A	PUBLIC CHARITY	PROMOTE THE ARTS	1,000
NATIONAL MILITARY FAMILY FOUNDATION2500 NORTH VAN DORN SUITE 102 ALEXANDRIA,VA 22302	N/A	PUBLIC CHARITY	SUPPORT FAMILIES OF MILITARY PERSONEL	300
NATURAL HISTORY MUSEUM OF THE ADIRONDACKSP O BOX 897 TUPPER LAKE,NY 12986	N/A	PUBLIC CHARITY	SUPPORT MUSEUM PROJECT	1,000
NICOLE CANUSO DANCE COMPANY913 FEDERAL STREET PHILADELPHIA,PA 19147	N/A	PUBLIC CHARITY	ARTS IN EDUCATION	1,000
NORTH COUNTRY PUBLIC RADIO 2501 ST LAWRENCE UNIVERSITY CANTON,NY 136171475	N/A	PUBLIC CHARITY	BROADCAST, ON-LINE AND COMMUNITY SERVICES	2,200
NORTHERN ADIRONDACK PLANNED PARENTHOOD66 BRINKERHOFF STREET PLATTSBURGH,NY 12901	N/A	PUBLIC CHARITY	SAFE MOTHERHOOD AND FAMILY PLANNING CONCERNS	4,000
NORTHWOOD SCHOOL SCHOLARSHIP FUNDP O BOX 1070 LAKE PLACID,NY 12946	N/A	PRIVATE EDUCATION IN	EDUCATIONAL INSTITUTION	2,000
OHIO THEATRESOHO THINK TANK 80 GREENWICH STREET NEW YORK,NY 10006	N/A	PUBLIC CHARITY	PROMOTE THEATRE ARTS	1,000
PARTNERS IN HEALTHP O BOX 845578 BOSTON,MA 022845578	N/A	PUBLIC CHARITY	PROVIDING UNIVERSAL ACCESS TO PRIMARY HEALTH CARE	500
PAUL SMITH'S COLLEGE P O BOX 265 PAUL SMITHS,NY 12970	N/A	PRIVATE EDUCATION IN	SUPPORT EDUCATIONAL PROGRAMS	10,000
PENDRAGON THEATRE148 RIVER STREET SARANAC LAKE,NY 12983	N/A	PUBLIC CHARITY	PROMOTE AND SUPPORT COMMUNITY THEATRE	3,700
PHILLIPS EXETER ACADEMY20 MAIN STREET EXETER,NH 038332460	N/A	PUBLIC CHARITY	SUPPORT EDUCATIONAL PROGRAMS	1,400
PIG IRON THEATRE COMPANYP O BOX 17275 PHILADELPHIA,PA 19105	N/A	PUBLIC CHARITY	ARTS IN EDUCATION	500
PURRE WATER COALITION13300-56 S CLEVELAND AVE FORT MYERS,FL 33907	N/A	PUBLIC CHARITY	ENVIRONMENTAL WATER ISSUES	2,500
REGIONAL FOOD BANK OF NORTHEASTERN NY965 ALBANY-SHAKER ROAD LATHAM,NY 121101409	N/A	PUBLIC CHARITY	FEED THE HUNGRY AND HOMELESS	1,000
SAN-CAP CONSERVATION FOUNDATIONP O BOX 839 SANIBEL,FL 339570839	N/A	PUBLIC CHARITY	PRESERVE THE QUALITY OF THE WATER WAY	1,000
SARANAC LAKE ADULT CENTERP O BOX 864 SARANAC LAKE,NY 12983	N/A	PUBLIC CHARITY	SUPPORT THE NEEDS OF THE AREA SENIOR CITIZENS	500
SARANAC LAKE CIVIC CENTER INCP O BOX 1040 SARANAC LAKE,NY 12983	N/A	PUBLIC CHARITY	COMMUNITY RECREATIONAL FACILITY	5,500
SARANAC LAKE FREE LIBRARY109 MAIN STREET SARANAC LAKE,NY 12983	N/A	PUBLIC CHARITY	SUPPORT PUBLIC LIBRARY	2,750
SARANAC LAKE VOLUNTEER FIRE COMPANY INCP O BOX 509 SARANAC LAKE,NY 12983	N/A	PUBLIC CHARITY	LOCAL FIRE AND RESCUE SERVICES	1,500
SOUTHEAST LAND TRUST OF NHP O BOX 675 EXETER,NH 038332460	N/A	PUBLIC CHARITY	CONSERVE THE SIGNIFICANT LAND AND NATURAL RESOURCES	400
ST JOSEPH'S REHABILITATION CENTERP O BOX 470 SARANAC LAKE,NY 12983	N/A	PUBLIC CHARITY	PROMOTE SUBSTANCE ABUSE SERVICES WITH MINISTRY	1,650
ST PAUL'S SCHOOL325 PLEASANT STREET CONCORD,NH 033019966	N/A	PRIVATE EDUCATION IN	EDUCATIONAL INSTITUTION	300

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
STREET SOCCER USA INC5 HANOVER SQUARE 17TH FL NEW YORK,NY 100042682	N/A	PUBLIC CHARITY	BUILD COMMUNITY AND TRUST THROUGH SPORTS WITH PARTIC	3,000
THE MAYHEW PROGRAMP O BOX 120 BRISTOL,NH 03222	N/A	PUBLIC CHARITY	CHALLENGES AND HELPS AT-RISK NEW HAMPSHIRE BOYS TO B	400
THE SALVATION ARMY200 TWIN OAKS DRIVE SYRACUSE,NY 132061210	N/A	PUBLIC CHARITY	SUPPORT FAMILIES IN NEED	700
TRI-LAKES HUMANE SOCIETYP O BOX 1111 SARANAC LAKE,NY 12983	N/A	PUBLIC CHARITY	SUPPORT THE LOCAL ANIMAL SHELTER	2,500
TRUDEAU INSTITUTEP O BOX 59 SARANAC LAKE,NY 12983	N/A	PUBLIC CHARITY	PROMOTE SCIENTIFIC RESEARCH	1,500
UNIVERSITY OF VERMONT411 MAIN STREET BURLINGTON,VT 054013411	N/A	PRIVATE EDUCATION IN	SUPPORT EDUCATIONAL PROGRAMS	500
UPPER SARANAC LAKE FOUNDATION INCP O BOX 564 SARANAC LAKE,NY 12983	N/A	PUBLIC CHARITY	INSURE WATER QUALITY OF UPPER SARANAC LAKE	16,900
USOP O BOX 96860 WASHINGTON,DC 200777677	N/A	PUBLIC CHARITY	SUPPORT US TROOPS	500
VARIOUS CHARITIES (250 OR LESS EACH)PO BOX 1355 SARANAC LAKE,NY 12983	N/A	PUBLIC CHARITIES	MISCELLANEOUS ORGANIZED CHARITIES	3,850
WASHINGTON INTERFAITH NETWORK1226 VERMONT AVENUE NW WASHINGTON,DC 200053615	N/A	PUBLIC CHARITY	FAITH BASED EDUCATION	500
WOMEN DELIVER584 BROADWAY SUITE 306 NEW YORK,NY 10012	N/A	PUBLIC CHARITY	PROMOTE SAFE MOTHERHOOD	2,000

**Total . . . . . 3a** 138,450

## TY 2011 Accounting Fees Schedule

**Name:** STARITCH FOUNDATION INC

**EIN:** 14-1827670

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING AND TAX PREP	11,500	11,500		0

## TY 2011 Investments Corporate Stock Schedule

**Name:** STARITCH FOUNDATION INC

**EIN:** 14-1827670

Name of Stock	End of Year Book Value	End of Year Fair Market Value
1275.231 SH EXXON MOBIL CORP	96,512	108,089
1800 SH I SHARES SILVER TRUST	34,630	48,492
454 SH GOLDCORP	20,217	20,090
2000 UTS BAYTEX ENERGY CORP	14,410	111,780
1145 SH SILVER WHEATON CORP	38,999	33,159
7596 SH KHD HUMBOLDT WEDAG INT'L	53,390	48,766
35000 SH TIGERLOGIC CORP	97,639	72,100
500 SH IMPALA PLATINUM SPON ADR	8,055	10,305
500 SH MARKET VECTOR GOLD MINERS	23,148	25,715
600 SH DU PONT EI DE NEMOURS & CO	14,002	27,468
240 SH CERNER CORP	12,696	14,700
785 SH AIR PRODUCTS & CHEMICALS INC	67,411	66,874
20000 SH BLUE EARTH REFINERIES	0	6,000
1000 SH HEWLETT-PACKARD CO.	21,990	25,760
89 SH IBM	16,953	16,365
50 SH INTUITIVE SURGICAL	20,888	23,151
21442 SH MFC INDUSTRIAL LTD	88,317	150,308
1250 SH MI DEVELOPMENTS INC	36,250	39,975
10000 SH RENTECH INC	15,425	13,100
4000 SH SPROTT RESOURCE CORP	18,661	15,660
400 SH TELEFLEX INC	22,106	24,516
300 SH WILLIAMS COS	9,303	9,906
1600 SH YAMANA GOLD CORP	26,196	23,504

**TY 2011 Investments - Other Schedule**

**Name:** STARITCH FOUNDATION INC

**EIN:** 14-1827670

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
1500 UTS PLAINS ALL AMERICAN PIPELINE, L.P.	AT COST	10,656	110,175
1750 UTS LINN ENERGY LLC	AT COST	24,314	66,343
2000 UTS ENTERPRISE PRODUCTS PTRS	AT COST	8,851	92,760

## TY 2011 Other Expenses Schedule

**Name:** STARITCH FOUNDATION INC

**EIN:** 14-1827670

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FILING FEE	250	0		0
INVESTMENT FEES	276	276		0
WELLS FARGO ADVISORY FEES	11,475	11,475		0

**TY 2011 Other Income Schedule****Name:** STARITCH FOUNDATION INC**EIN:** 14-1827670

<b>Description</b>	<b>Revenue And Expenses Per Books</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>
ENTERPRISE PRODUCTS PARTNERS L P	129		129
PLAINS ALL AMERICAN PIPELINE, L P	-3,796		-3,796
LINN ENERGY LLC	2,607		2,607

## TY 2011 Substantial Contributors Schedule

**Name:** STARITCH FOUNDATION INC

**EIN:** 14-1827670

Name	Address
CHARLES L RITCHIE JR	C/O WM A SWEENEY CPA PO BOX 1355 SARANAC LAKE, NY 129837355
ANNE S RITCHIE HOLUM	C/O WM A SWEENEY CPA PO BOX 1355 SARANAC LAKE, NY 129837355
DOROTHY N RITCHIE-VALHOULI	C/O WM A SWEENEY CPA PO BOX 1355 SARANAC LAKE, NY 129837355
JAMES M RITCHIE	C/O WM A SWEENEY CPA PO BOX 1355 SARANAC LAKE, NY 129837355
MARY ANNE RITCHIE	C/O WM A SWEENEY CPA PO BOX 1355 SARANAC LAKE, NY 129837355
ROBERT M HOLUM	C/O WM A SWEENEY CPA PO BOX 1355 SARANAC LAKE, NY 129837355
SALLY B RITCHIE	C/O WM A SWEENEY CPA PO BOX 1355 SARANAC LAKE, NY 129837355
ROBERT M HOLUM	C/O WM A SWEENEY CPA PO BOX 1355 SARANAC LAKE, NY 129837355

## TY 2011 Taxes Schedule

**Name:** STARITCH FOUNDATION INC

**EIN:** 14-1827670

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	1,625	1,625		0