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

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

2011

For calendar year 2011 or tax year beginning , and ending

Name of foundation MGN Family Foundation		A Employer identification number 25-6873635			
Number and street (or P O box number if mail is not delivered to street address) Foundation Source 501 Silverside Rd		Room/suite 123			
City or town, state, and ZIP code Wilmington DE 19809-1377		C If exemption application is pending, check here ► <input type="checkbox"/>			
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here ► <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/>			
H Check type of organization <input type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/>			
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ 1,629,931	J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/>			
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 instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue					
1 Contributions, gifts, grants, etc., received (attach schedule)					
2 Check ► <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B					
3 Interest on savings and temporary cash investments	10	10			
4 Dividends and interest from securities	60,248	60,248			
5 a Gross rents					
b Net rental income or (loss)					
6 a Net gain or (loss) from sale of assets not on line 10	120,462				
b Gross sales price for all assets on line 6a	790,181				
7 Capital gain net income (from Part IV, line 2)		120,462			
8 Net short-term capital gain					
9 Income modifications					
10 a Gross sales less returns and allowances					
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)	-795	15			
12 Total. Add lines 1 through 11	179,925	180,735			
Operating and Administrative Expenses					
13 Compensation of officers, directors, trustees, etc					
14 Other employee salaries and wages					
15 Pension plans, employee benefits					
16 a Legal fees (attach schedule)					
b Accounting fees (attach schedule)					
c Other professional fees (attach schedule)	21,755	21,755			
17 Interest					
18 Taxes (attach schedule) (see instructions)	634				
19 Depreciation (attach schedule) and depletion					
20 Occupancy					
21 Travel, conferences, and meetings					
22 Printing and publications					
23 Other expenses (attach schedule)	1,388	1,028			
24 Total operating and administrative expenses.					
Add lines 13 through 23	23,777	22,783	0		
25 Contributions, gifts, grants paid	100,000			100,000	
26 Total expenses and disbursements. Add lines 24 and 25	123,777	22,783		100,000	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	56,148				
b Net investment income (if negative, enter -0-)		157,952			
c Adjusted net income (if negative, enter -0-)					

For Paperwork Reduction Act Notice, see instructions.

(HTA)

Form 990-PF (2011)

10G14

SCANNED NOV 26 2012

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	1,984		
	2 Savings and temporary cash investments	34,359	73,310	73,310
	3 Accounts receivable ►			
	Less allowance for doubtful accounts ►			
	4 Pledges receivable ►			
	Less allowance for doubtful accounts ►			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ►			
	Less allowance for doubtful accounts ►			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10 a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	1,346,326	1,259,021	1,320,277
	c Investments—corporate bonds (attach schedule)			
Liabilities	11 Investments—land, buildings, and equipment basis ►			
	Less accumulated depreciation (attach schedule) ►			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	111,765	218,251	236,344
	14 Land, buildings, and equipment basis ►			
	Less accumulated depreciation (attach schedule) ►			
	15 Other assets (describe ►)			
	16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	1,494,434	1,550,582	1,629,931
	17 Accounts payable and accrued expenses			
	18 Grants payable			
Net Assets or Fund Balances	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (descnbe ►)			
	23 Total liabilities (add lines 17 through 22)	0	0	
	Foundations that follow SFAS 117, check here ► <input type="checkbox"/>			
	and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
Net Assets or Fund Balances	Foundations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/>			
	and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds	1,494,434	1,550,582	
	30 Total net assets or fund balances (see instructions)	1,494,434	1,550,582	
Net Assets or Fund Balances	31 Total liabilities and net assets/fund balances (see instructions)	1,494,434	1,550,582	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,494,434
2 Enter amount from Part I, line 27a	2	56,148
3 Other increases not included in line 2 (itemize) ►	3	
4 Add lines 1, 2, and 3	4	1,550,582
5 Decreases not included in line 2 (itemize) ►	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	1,550,582

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.)
1a Publicly-traded Securities				
b Passthrough K1 Capital Gain				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a 790,181		660,680	129,501	
b			-9,039	
c				
d				
e				
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		
a			129,501	
b			-9,039	
c				
d				
e				
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2	120,462
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	{ }		3	

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

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

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

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2010	91,439	1,660,334	0.055073
2009	68,150	1,448,066	0.047063
2008	75,224	1,580,694	0.047589
2007	39,500	1,447,346	0.027291
2006	52,000	977,609	0.053191

2 Total of line 1, column (d) 2 0.230207

3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 3 0.046041

4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5 4 1,707,324

5 Multiply line 4 by line 3 5 78,607

6 Enter 1% of net investment income (1% of Part I, line 27b) 6 1,580

7 Add lines 5 and 6 7 80,187

8 Enter qualifying distributions from Part XII, line 4 8 100,000

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)1 a Exempt operating foundations described in section 4940(d)(2), check here ► and enter "N/A" on line 1.

Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)

b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► and enter 1% of Part I, line 27b

c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)

2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

3 Add lines 1 and 2

4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-

6 Credits/Payments

a 2011 estimated tax payments and 2010 overpayment credited to 2011

6a 564

b Exempt foreign organizations—tax withheld at source

6b

c Tax paid with application for extension of time to file (Form 8868)

6c 1,196

d Backup withholding erroneously withheld

6d

7 Total credits and payments Add lines 6a through 6d

8 Enter any penalty for underpayment of estimated tax Check here if Form 2220 is attached

9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed

10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid

11 Enter the amount of line 10 to be Credited to 2012 estimated tax ►

180

Refunded

► 11

0

Part VII-A Statements Regarding Activities

1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?

Yes

No

1a

X

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)?

1b

X

If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities

c Did the foundation file Form 1120-POL for this year?

1c

X

d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year

(1) On the foundation ► \$ _____ (2) On foundation managers ► \$ _____

e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____

2 Has the foundation engaged in any activities that have not previously been reported to the IRS?

2

X

*If "Yes," attach a detailed description of the activities*3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*

3

X

4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?

4a

X

b If "Yes," has it filed a tax return on Form 990-T for this year?

4b

N/A

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?

5

X

If "Yes," attach the statement required by General Instruction T

6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either

6

X

● 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?

7 Did the foundation have at least \$5,000 in assets at any time during the year? *If "Yes," complete Part II, col. (c), and Part XV*

7

X

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

VT

8b

X

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

General (or designate) of each state as required by General Instruction G? *If "No," attach explanation*9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? *If "Yes," complete Part XIV*

9

X

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

10

X

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions).	12	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ►	13	X
14	The books are in care of ► c/o Foundation Source Located at ► 501 Silverside Road Suite 123 Wilmington DE	Telephone no ► (800) 839-1754 ZIP+4 ► 19809	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year	► 15	► <input type="checkbox"/>
16	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? See the instructions for exceptions and filing requirements for Form TD F 90-221. If "Yes," enter the name of the foreign country ►	16	Yes X

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
1a	During the year did the foundation (either directly or indirectly)	
(1)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(5)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(6)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If any answer is "Yes" to 1a(1)–(6), did any 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 instructions)? Organizations relying on a current notice regarding disaster assistance check here ► <input type="checkbox"/>	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))	
a	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011? If "Yes," list the years ► 20_____ , 20_____ , 20_____ , 20_____	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions)	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20_____ , 20_____ , 20_____ , 20_____	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	
b	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011)	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	
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?	

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

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions) Yes No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?Organizations relying on a current notice regarding disaster assistance check here **c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

If "Yes," attach the statement required by Regulations section 53.4945–5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?**5b** N/A**6b** X**7b** N/A**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 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 ATTACHMENT				

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

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE	00			
-----	00			
-----	00			
-----	00			
-----	00			
-----	00			

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

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 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

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as

the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc		Expenses
1	
	
2	
	
3	
	
4	
	

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

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

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

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	1,564,780
b	Average of monthly cash balances	1b	59,360
c	Fair market value of all other assets (see instructions)	1c	109,184
d	Total (add lines 1a, b, and c)	1d	1,733,324
e	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	2	
3	Subtract line 2 from line 1d	3	1,733,324
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see instructions)	4	26,000
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,707,324
6	Minimum investment return. Enter 5% of line 5	6	85,366

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

1	Minimum investment return from Part X, line 6	1	85,366
2a	Tax on investment income for 2011 from Part VI, line 5	2a	1,580
b	Income tax for 2011 (This does not include the tax from Part VI)	2b	0
c	Add lines 2a and 2b	2c	1,580
3	Distributable amount before adjustments Subtract line 2c from line 1	3	83,786
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	83,786
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	83,786

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	1a	100,000
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1b	0
b	Program-related investments—total from Part IX-B	2	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	3a	
3	Amounts set aside for specific charitable projects that satisfy the	3b	0
a	Suitability test (prior IRS approval required)	4	100,000
b	Cash distribution test (attach the required schedule)	5	1,580
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	6	98,420
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)		
6	Adjusted qualifying distributions. Subtract line 5 from line 4		

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 instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distrnbutable amount for 2011 from Part XI, line 7				83,786
2 Undistrnbutable income, if any, as of the end of 2011				
a Enter amount for 2010 only				2,128
b Total for prior years 20 ____, 20 ____, 20 ____			0	
3 Excess distrnbutions carryover, if any, to 2011				
a From 2006	0			
b From 2007	0			
c From 2008	0			
d From 2009	0			
e From 2010	0			
f Total of lines 3a through e	0			
4 Qualifying distributions for 2011 from Part XII, line 4 ► \$ 100,000				
a Applied to 2010, but not more than line 2a				2,128
b Applied to undistrnbutable income of prior years (Election required—see instructions)			0	
c Treated as distributions out of corpus (Election required—see instructions)				
d Applied to 2011 distrnbutable amount				83,786
e Remaining amount distributed out of corpus	14,086			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:	14,086			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 .				
b Prior years' undistrnbutable income Subtract line 4b from line 2b			0	
c Enter the amount of prior years' undistrnbutable 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			0	
e Undistrnbutable income for 2010. Subtract line 4a from line 2a Taxable amount—see instructions				0
f Undistrnbutable income for 2011 Subtract lines 4d and 5 from line 1. This amount must be distrnbuted in 2012				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) .				
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) .	0			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	14,086			
10 Analysis of line 9				
a Excess from 2007	0			
b Excess from 2008	0			
c Excess from 2009	0			
d Excess from 2010	0			
e Excess from 2011	14,086			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

N/A

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

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))

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

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 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

www.mgnfamilyfoundation.org

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

See Line 2a

c Any submission deadlines

See Line 2a

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

See Line 2a

Part XV Supplementary Information (continued)

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)				
a Paid during the year				
ALLIANCE FOR NEIGHBORS INC PO BOX 160096	N/A	509(a)(1)	General & Unrestricted	2,000
ALTAMONTE SPG FL 32716	N/A	509(a)(1)	General & Unrestricted	1,000
ANGEL FLIGHT SOARS INC 2000 AIRPORT RD CHAMBLEE GA 30341	N/A	509(a)(1)	General & Unrestricted	1,000
BICYCLES FOR THE HOMELESS INC 8437 TUTTLE AVE 358 SARASOTA FL 34243	N/A	509(a)(1)	General & Unrestricted	2,000
BIG BRTHRS-BIG SSTRS OF GRTR MANCHESTER 25 LOWELL ST STE 201 MANCHESTER NH 03101	N/A	509(a)(1)	General & Unrestricted	1,000
BLUE RIDGE MOUNTAINS HEALTH PROJECT INC PO BOX 451 CASHIERS NC 28717	N/A	509(a)(1)	General & Unrestricted	2,000
CAMP KESEM NATIONAL PO BOX 1113 LAFAYETTE CA 94549	N/A	509(a)(1)	General & Unrestricted	1,000
CENTRAL CHRISTIAN COLLEGE OF THE BIBLE 911 E URBANDALE DR MOBERLY MO 65270	N/A	509(a)(1)	General & Unrestricted	1,000
CHANGE IN ACTION 12884 HARBOR DR WOODBRIDGE VA 22192	N/A	509(a)(2)	General & Unrestricted	1,000
CHILDRENS MEDICAL CENTER 1 CHILDRENS PLZ DAYTON OH 45404	N/A	509(a)(1)	General & Unrestricted	2,000
COMMUNITY HOPE INC 199 POMEROY RD PARSIPPANY NJ 07054	N/A	509(a)(1)	General & Unrestricted	3,500
CRAFTSBURY PUBLIC LIBRARY INC PO BOX 74 CRAFTSBURY CM VT 05827	N/A	509(a)(1)	General & Unrestricted	3,000
Total . . . See Attached Statement			► 3a	100,000
b Approved for future payment				
Total			► 3b	0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	10	
4 Dividends and interest from securities			14	60,248	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	120,462	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a K-1 Pass-Through Inc / (Loss)	525990	-810	14	15	
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		-810		180,735	0
13 Total Add line 12, columns (b), (d), and (e)				13	179,925
(See worksheet in line 12 instructions to verify calculations.)					

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Part XVII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

		Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
a	Transfers from the reporting foundation to a noncharitable exempt organization of		
(1)	Cash	1a(1)	X
(2)	Other assets	1a(2)	X
b	Other transactions		
(1)	Sales of assets to a noncharitable exempt organization	1b(1)	X
(2)	Purchases of assets from a noncharitable exempt organization	1b(2)	X
(3)	Rental of facilities, equipment, or other assets	1b(3)	X
(4)	Reimbursement arrangements	1b(4)	X
(5)	Loans or loan guarantees	1b(5)	X
(6)	Performance of services or membership or fundraising solicitations	1b(6)	X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c	X
d	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Yes No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

**Paid
Preparer
Use Only**

Print/Type preparer's name

Preparer's signature

10

BTIN

1. File type preparer's name

11/5/12

Title

Date

Firm's EIN ► 51-0398347

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Jeffrey D Haskell	Jeffrey D. Haskell	10/29/2012		P01345770
	Firm's name ► Foundation Source	Firm's EIN ► 51-0398347			
Firm's address ► 55 Walls Drive, Fairfield, CT 06824				Phone no (800) 839-1754	

Form 990-PF, Part I, Line 11 - Other Income

	Description	TOTAL:	-795	15	0
		(a) Revenue per Books	(b) Net Investment Income	(c) Adjusted Net Income	
1	ARDEN-SAGE MULTI-STRATEGY TEI INSTL FUND K-1 Pass-Through Share of Income/(Loss)	2	2	2	0
2	CALUMET SPECIALTY PRODUCTS PARTNERS, LP K-1 Pass-Through Share of Income/(Loss)	-759	8	8	0
3	EV ENERGY PARTNERS, LP K-1 Pass-Through Share of Income/(Loss)	-38	5	5	0
4					
5					
6					
7					
8					
9					
10					

Form 990-PF, Part I, Line 16c - Other Professional Fees

	Description	(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purpose
1	Investment Management Services	21,755	21,755	0	0
2					
3					
4					
5					
6					
7					
8					
9					
10					

Form 990-PF, Part I, Line 18 - Taxes

	Description	(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purpose
1	Estimated Tax for 2011		423	0	0
2	Excise Tax for 2010		211	0	0
3					
4					
5					
6					
7					
8					
9					
10					

TOTAL: 634

Form 990-PF, Part I, Line 23 - Other Expenses

	Description	(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purpose
	TOTAL:	1,388	1,028	0	0
1	ARDEN-SAGE MULTI-STRATEGY TEI INSTL FUND K-1 Pass-Through Share of Expenses	1,028	1,028	0	0
2	CALUMET SPECIALTY PRODUCTS PARTNERS, LP K-1 Nondeductible Pass-Through Share of Expenses	22	0	0	0
3	EV ENERGY PARTNERS, LP K-1 UBI Pass-Through Share of Expenses	338	0	0	0
4					
5					
6					
7					
8					
9					
10					

Form 990-PF, Part II, Line 10b - Investments - Corporate Stock

	Description	Shares	Book Value End of Year	FMV End of Year
1	AMERICAN CENTURY EQUITY INCOME INSTL (ACIMX)	16,072	95,034	117,006
2	ARTIO GLOBAL HIGH INCOME FUND CLASS I (JHYIX)	8,923	91,644	82,979
3	ARTIO INTERNATIONAL II - I (JETIX)	9,521	126,725	90,925
4	DODGE & COX INCOME FUND (DODIX)	6,823	85,159	90,741
5	GOLDMAN SACHS GRWTH OPPORTUNITIES FD (GGOIX)	3,045	39,483	67,226
6	GOLDMAN SACHS SM CAP VALUE FUND INSTITUTIONAL SH (GSSIX)	537	17,954	21,939
7	ISHARES TRUST RUSSELL 2000 VALUE INDEX FUND (IWN)	306	14,102	20,086
8	LAZARD EMERGING MARKETS EQUITY INSTL (LZEMX)	5,533	61,127	92,962
9	MAINSTAY CONVERTIBLE FUND CL I (MCNVX)	2,271	37,970	32,092
10	PIMCO COMMODITY REAL RETURN STRATEGY FUND (PCRIX)	8,804	68,860	57,579
11	PIMCO EMERGING LOCAL BD FD INSTL CL (PELBX)	2,591	27,306	26,041
12	PIMCO EMERGING MARKETS BOND INSTL (PEBIX)	829	8,631	9,331
13	PIMCO FD PAC INV MGMT FOREIGN (PFUIIX)	1,367	14,980	14,889
14	PIMCO FUNDS FOREIGN BOND FUND INSTITUTIONAL SHARES (PFORX)	5,726	59,162	60,583
15	PIMCO REAL RETURN BOND INSTL (PRRIX)	3,299	38,127	38,891
16	PIMCO TOTAL RETURN FUND (PTTRX)	6,709	68,088	72,930
17	PRINCIPAL PREFERRED SECURITIES FUND (PPSIX)	3,678	37,007	34,500
18	RIDGEWORTH FDS MID-CAP VALUE EQUITY FUND CLASS I (SMVTEX)	6,458	51,134	63,420
19	THE JENSEN PORTFOLIO INC CLASS I SHARES (JENIX)	4,156	117,698	110,207
20	THORNBURG GLOBAL VALUE FUND CLASS I (TGVIIX)	3,947	102,028	97,024
21	VANGUARD GROWTH ETF (VUG)	1,247	63,963	77,015
22	VANGUARD INDEX TRUST SMALL-CAP GROWTH INDEX FUND (VISGX)	1,950	32,839	41,911
	TOTAL:		1,259,021	1,320,277

Form 990-PF, Part II, Line 13 - Investments - Other

	Asset Description	Book Value End of Year	FMV End of Year	TOTAL:
1	ARDEN-SAGE MULTI-STRATEGY TEI INSTL FUND (ARDENSAGE)	101,698	109,184	218,251
2	CALUMET SPECIALTY PRODUCTS PARTNERS, LP (CLMT)	87,888	100,800	
3	EV ENERGY PARTNERS, LP (EVEP)	28,665	26,360	
4				
5				
6				
7				
8				
9				
10				
				236,344

MGN Family Foundation
EIN: 25-6873635
Taxable Year Ending December 31, 2011

Form 990-PF, Part VII, Line 3 - Amended Trust Agreement

**FIRST AMENDMENT TO TRUST AGREEMENT
ESTABLISHING MGN FOUNDATION**

FIRST AMENDMENT TO TRUST AGREEMENT, creating the MGN FOUNDATION,
made and entered into this 23rd day of June, 2011, by and among MARCIA G.
NAPPI, ROBERT A. NAPPI, MISTY LEONARD and MARK A. LANGAN, ESQ., as Directors
(referred to as the "Directors"), and MICHAEL S. SINGER, ESQ., as Trustee (referred to as the
"Trustee").

ACKNOWLEDGMENTS

- A. On April 14, 2005, MARCIA G. NAPPI, as Settlor, entered into a Trust Agreement Establishing MGN Foundation (referred to as the "Trust Agreement").
- B. ARTICLE 6 of the Trust Agreement provides that the Trust Agreement may be amended by a written instrument signed and acknowledged by the Directors and the Trustee.
- C. The Directors and the Trustee desire to amend the Trust Agreement as follows:

AMENDMENT

Section 7.1 of the Trust Agreement is revoked in its entirety and replaced with a new Section 7.1 which reads as follows:

" 7.1 TRUSTEE RESIGNATION; REMOVAL; REPLACEMENT

Any Trustee under this Trust Agreement may resign the office of Trustee by written instrument signed, acknowledged and delivered to the then serving Directors. Any Trustee under this Trust Agreement may be removed from the office of Trustee by written instrument, signed and acknowledged by the Settlor or if the Settlor is unable to remove the Trustee, by a majority of the Directors. Upon the resignation, removal or inability to serve of the Trustee, a successor Trustee may be appointed by the Settlor or, in the event the Settlor is unable or unwilling to appoint a successor Trustee, by a majority of the Directors, or in the event a majority of the Directors is unable or unwilling to appoint a successor Trustee, by the resigning Trustee (if the Trustee has resigned)."

RATIFICATION

The Directors and the Trustee hereby ratify and reaffirm the Trust Agreement as modified by this First Amendment to Trust Agreement.

WITNESSES:

Etha Rohr

Joan S. Weeks

Witnesses as to Marcia G. Nappi

Etha Rohr

Joan S. Weeks

Witnesses as to Robert A. Nappi

x Etha Rohr

Etha Rohr

Jennifer C. Sparer

Witnesses as to Misty Leonard

Etha Rohr

Joan S. Weeks

Witnesses as to Mark A. Langan, Esq.

BSM

Megan Langan

Witnesses as to Michael S. Singer, Esq.

DIRECTORS:

Marcia G. Nappi

MARCIA G. NAPPI

Robert A. Nappi

ROBERT A. NAPPI

Misty Leonard

MISTY LEONARD

Mark A. Langan

MARK A LANGAN, ESQ.

TRUSTEE:

Michael S. Singer

MICHAEL S. SINGER, ESQ.

STATE OF Vermont)
COUNTY OF Chittenden) ss.:

The foregoing instrument was subscribed and sworn to before me this 14th day of June, 2011, by MARCIA G. NAPPI, as a Director, who is personally known to me or who has produced _____ as identification.

Marcia G. Nappi
Signature of Notary Public
My Commission Expires: 2/10/2015

(Print, type or stamp commissioned name of Notary Public)

STATE OF Vermont)
COUNTY OF Chittenden) ss.:

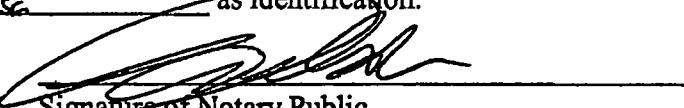
The foregoing instrument was subscribed and sworn to before me this 14th day of June, 2011, by ROBERT A. NAPPI, as a Director, who is personally known to me or who has produced _____ as identification.

Robert A. Nappi
Signature of Notary Public
My Commission Expires: 2/10/2015

(Print, type or stamp commissioned name of Notary Public)

STATE OF MARYLAND)
COUNTY OF Montgomery) ss.:

The foregoing instrument was subscribed and sworn to before me this 20th day of June, 2011, by MISTY LEONARD, as a Director, who is personally known to me or who has produced MD - Drivers License as identification.


Signature of Notary Public
My Commission Expires: 3-12-13

(Print, type or stamp commissioned name of Notary Public)

STATE OF Vermont)
COUNTY OF Chittenden)
) SS.:
)

The foregoing instrument was subscribed and sworn to before me this 14th day of June, 2011, by MARK A. LANGAN, ESQ., as a Director, who is personally known to me or who has produced _____ as identification.

Mark A. Langan
Signature of Notary Public
My Commission Expires: 2/10/2015

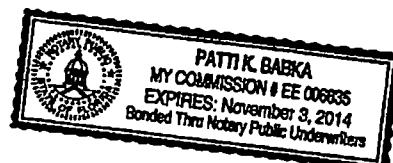
(Print, type or stamp commissioned name of Notary Public)

STATE OF FLORIDA)
COUNTY OF PALM BEACH)
) SS.:
)

The foregoing instrument was subscribed and sworn to before me this 23rd day of June, 2011, by MICHAEL S. SINGER, as Trustee, who is personally known to me or who has produced n/a as identification.

Patti Babka
Signature of Notary Public
My Commission Expires: _____

(Print, type or stamp commissioned name of Notary Public)



Form 990-PF, Part VIII, Line 1 - Compensation of Officers, Directors, Trustees and Foundation Managers

	Name	Street	City	State	Zip Code	Title	Avg Hrs	Comp	Benefits	Expense Acct	TOTAL:
1	Marcia Nappi	Foundation Source 501 Silverside Rd	Wilmington	DE	19809	President / Director	1	0	0	0	0
2	Robert A Nappi	Foundation Source 501 Silverside Rd	Wilmington	DE	19809	Trustee / Director	1	0	0	0	0
3	Wells Fargo (Removed in 2011)*	Foundation Source 501 Silverside Rd	Wilmington	DE	19809	Trustee	1	0	0	0	0
4	Misty Leonard	Foundation Source 501 Silverside Rd	Wilmington	DE	19809	Director	1	0	0	0	0
5	Michael S. Singer, Esq (Removed in 2011)	Foundation Source 501 Silverside Rd	Wilmington	DE	19809	Trustee	1	0	0	0	0
6	Mark Langan, Esq	Foundation Source 501 Silverside Rd	Wilmington	DE	19809	Director	1	0	0	0	0
7	Kyle Smith	Foundation Source 501 Silverside Rd	Wilmington	DE	19809	Director	1	0	0	0	0
8	Jeremy Leonard	Foundation Source 501 Silverside Rd	Wilmington	DE	19809	Director	1	0	0	0	0
10											

*Wells Fargo, Trustee, was paid \$21,755 by the Foundation to provide investment management services. This compensation is reported on Part I, Line 16c to be
9 consistent with the character of the expense.

Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year**Recipient(s) paid during the year****Name**

DOMESTIC ABUSE SERVICES INC

Street

PO BOX 805

City NEWTON	State NJ	Zip Code 07860	Foreign Country
----------------	-------------	-------------------	-----------------

Relationship N/A	Foundation Status 509(a)(1)
---------------------	--------------------------------

Purpose of grant/contribution General & Unrestricted	Amount 2,000
---	-----------------

Name

EMMANUEL CANCER FOUNDATION INC

Street

1833 FRONT ST

City SCOTCH PLAINS	State NJ	Zip Code 07076	Foreign Country
-----------------------	-------------	-------------------	-----------------

Relationship N/A	Foundation Status 509(a)(1)
---------------------	--------------------------------

Purpose of grant/contribution General & Unrestricted	Amount 2,000
---	-----------------

Name

EVE INC

Street

PO BOX 14149

City LANSING	State MI	Zip Code 48901	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship N/A	Foundation Status 509(a)(1)
---------------------	--------------------------------

Purpose of grant/contribution General & Unrestricted	Amount 1,000
---	-----------------

Name

FAMILY SERVICE OF CHESTER COUNTY

Street

310 N MATLACK ST

City WEST CHESTER	State PA	Zip Code 19380	Foreign Country
----------------------	-------------	-------------------	-----------------

Relationship N/A	Foundation Status 509(a)(1)
---------------------	--------------------------------

Purpose of grant/contribution General & Unrestricted	Amount 1,000
---	-----------------

Name

FRESH START SURGICAL GIFTS

Street

2011 PALOMAR AIRPORT RD STE 206

City CARLSBAD	State CA	Zip Code 92011	Foreign Country
------------------	-------------	-------------------	-----------------

Relationship N/A	Foundation Status 509(a)(1)
---------------------	--------------------------------

Purpose of grant/contribution General & Unrestricted	Amount 3,000
---	-----------------

Name

HEALING THE CHILDREN NEW JERSEY INC

Street

112 5TH AVE

City HAWTHORNE	State NJ	Zip Code 07506	Foreign Country
-------------------	-------------	-------------------	-----------------

Relationship N/A	Foundation Status 509(a)(1)
---------------------	--------------------------------

Purpose of grant/contribution General & Unrestricted	Amount 1,000
---	-----------------

Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year**Recipient(s) paid during the year****Name**

HORSES HELP FOUNDATION

Street

PO BOX 71005

City

PHOENIX

State

AZ

Zip Code

85050

Foreign Country**Relationship**

N/A

Foundation Status

509(a)(1)

Purpose of grant/contribution	Amount
General & Unrestricted	3,500

Name

HOSPICE SAVANNAH INC

Street

1674 CHATHAM PKWY

City

SAVANNAH

State

GA

Zip Code

31405

Foreign Country**Relationship**

N/A

Foundation Status

509(a)(1)

Purpose of grant/contribution	Amount
General & Unrestricted	500

Name

JOHN F KENNEDY MEDICAL CENTER FOUNDATION INC

Street

98 JAMES ST

City

EDISON

State

NJ

Zip Code

08820

Foreign Country**Relationship**

N/A

Foundation Status

509(a)(1)

Purpose of grant/contribution	Amount
General & Unrestricted	2,000

Name

LEGACY OF LEARNING

Street

5440 CONESTOGA CT

City

BOULDER

State

CO

Zip Code

80301

Foreign Country**Relationship**

N/A

Foundation Status

509(a)(1)

Purpose of grant/contribution	Amount
General & Unrestricted	2,000

Name

LUND FAMILY CENTER INC

Street

PO BOX 4009

City

BURLINGTON

State

VT

Zip Code

05406

Foreign Country**Relationship**

N/A

Foundation Status

509(a)(2)

Purpose of grant/contribution	Amount
General & Unrestricted	3,000

Name

MARRIAGE MANAGEMENT CONSULTANTS INC

Street

3061 SW CR 0018

City

CORSICANA

State

TX

Zip Code

75110

Foreign Country**Relationship**

N/A

Foundation Status

509(a)(1)

Purpose of grant/contribution	Amount
General & Unrestricted	4,500

Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

NEHEMIAH HOUSE INC

Street

1607 CROMWELL BRIDGE RD

City BALTIMORE	State MD	Zip Code 21234	Foreign Country
-------------------	-------------	-------------------	-----------------

Relationship N/A	Foundation Status 509(a)(1)		
---------------------	--------------------------------	--	--

Purpose of grant/contribution General & Unrestricted	Amount 4,500
---	-----------------

Name

NEWARK BOYS CHORUS SCHOOL

Street

1016 BROAD ST

City NEWARK	State NJ	Zip Code 07102	Foreign Country
----------------	-------------	-------------------	-----------------

Relationship N/A	Foundation Status 509(a)(1)		
---------------------	--------------------------------	--	--

Purpose of grant/contribution General & Unrestricted	Amount 3,000
---	-----------------

Name

OUR HOUSE INC

Street

711 S COLUMBIA DR

City DECATUR	State GA	Zip Code 30030	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship N/A	Foundation Status 509(a)(1)		
---------------------	--------------------------------	--	--

Purpose of grant/contribution General & Unrestricted	Amount 2,000
---	-----------------

Name

PSYCHOANALYTIC SOCIETY INC FLORIDA

Street

420 S DIXIE HWY STE 2F

City CORAL GABLES	State FL	Zip Code 33146	Foreign Country
----------------------	-------------	-------------------	-----------------

Relationship N/A	Foundation Status 509(a)(2)		
---------------------	--------------------------------	--	--

Purpose of grant/contribution General & Unrestricted	Amount 2,000
---	-----------------

Name

RENEWAL COALITION INC

Street

88 W RIVERSIDE DR

City JUPITER	State FL	Zip Code 33469	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship N/A	Foundation Status 509(a)(1)		
---------------------	--------------------------------	--	--

Purpose of grant/contribution General & Unrestricted	Amount 3,500
---	-----------------

Name

SARASOTA-MANATEE ASSOCIATION FOR RIDING THERAPY INC

Street

4640 COUNTY RD 675 E

City BRADENTON	State FL	Zip Code 34211	Foreign Country
-------------------	-------------	-------------------	-----------------

Relationship N/A	Foundation Status 509(a)(1)		
---------------------	--------------------------------	--	--

Purpose of grant/contribution General & Unrestricted	Amount 2,000
---	-----------------

Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year**Recipient(s) paid during the year****Name**

SHELBURNE FARMS

Street

1611 HARBOR RD

City SHELBURNE	State VT	Zip Code 05482	Foreign Country
Relationship N/A	Foundation Status 509(a)(2)		

Purpose of grant/contribution General & Unrestricted	Amount 4,500
--	------------------------

Name

SILVER STAR FAMILIES OF AMERICA

Street

525 CAVE HOLLOW RD

City CLEVER	State MO	Zip Code 65631	Foreign Country
Relationship N/A	Foundation Status 509(a)(1)		

Purpose of grant/contribution General & Unrestricted	Amount 4,500
--	------------------------

Name

SMITH FARM LTD

Street

1632 U ST NW

City WASHINGTON	State DC	Zip Code 20009	Foreign Country
Relationship N/A	Foundation Status 509(a)(1)		

Purpose of grant/contribution General & Unrestricted	Amount 2,500
--	------------------------

Name

SPECTRUM INC

Street

31 ELMWOOD AVE

City BURLINGTON	State VT	Zip Code 05401	Foreign Country
Relationship N/A	Foundation Status 509(a)(1)		

Purpose of grant/contribution General & Unrestricted	Amount 2,000
--	------------------------

Name

SPRING VALLEY SCHOOL INC

Street

2109 NEBRASKA AVE

City PALM HARBOR	State FL	Zip Code 34683	Foreign Country
Relationship N/A	Foundation Status 509(a)(1)		

Purpose of grant/contribution General & Unrestricted	Amount 2,000
--	------------------------

Name

ST JUDE HOUSE INC

Street

12490 MARSHALL ST

City CROWN POINT	State IN	Zip Code 46307	Foreign Country
Relationship N/A	Foundation Status 509(a)(1)		

Purpose of grant/contribution General & Unrestricted	Amount 2,000
--	------------------------

Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year**Recipient(s) paid during the year****Name**

TELICO VILLAGE COMPUTER USERS CLUB

Street

298 VILLAGE SQ NO 128

City LOUDON	State TN	Zip Code 37774	Foreign Country
----------------	-------------	-------------------	-----------------

Relationship N/A	Foundation Status 509(a)(2)
---------------------	--------------------------------

Purpose of grant/contribution General & Unrestricted	Amount 2,000
---	-----------------

Name

THE COMMUNITY PARTNERSHIP

Street

1101 HAUCK DR

City ROLLA	State MO	Zip Code 65401	Foreign Country
---------------	-------------	-------------------	-----------------

Relationship N/A	Foundation Status 509(a)(1)
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Purpose of grant/contribution General & Unrestricted	Amount 2,000
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Name

THE GREATER MORRISTOWN YMCA INC

Street

79 HORSEHILL RD

City CEDAR KNOLLS	State NJ	Zip Code 07927	Foreign Country
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Relationship N/A	Foundation Status 509(a)(1)
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Purpose of grant/contribution General & Unrestricted	Amount 2,000
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Name

THE WILLIAM PATERSON UNIVERSITY OF NEW JERSEY FOUNDATION

Street

300 POMPTON RD

City WAYNE	State NJ	Zip Code 07470	Foreign Country
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Relationship N/A	Foundation Status 509(a)(1)
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Purpose of grant/contribution General & Unrestricted	Amount 2,000
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Name

TRI-COUNTY LITERACY

Street

34 WING FARM PKWY

City BATH	State ME	Zip Code 04530	Foreign Country
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Relationship N/A	Foundation Status 509(a)(1)
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Purpose of grant/contribution General & Unrestricted	Amount 1,500
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Name

UNCOMMON THREAD

Street

1071 VALLEY RD

City STIRLING	State NJ	Zip Code 07980	Foreign Country
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Relationship N/A	Foundation Status 509(a)(2)
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Purpose of grant/contribution General & Unrestricted	Amount 2,000
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Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

UNITED COMMUNITY SERVICES FOR WORKING FAMILIES

Street

116 N 5TH ST

City READING	State PA	Zip Code 19601	Foreign Country
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Relationship N/A	Foundation Status 509(a)(1)
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Purpose of grant/contribution General & Unrestricted	Amount 2,000
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Name

VISITING NURSE HEALTH SYSTEM INC

Street

5775 GLENRIDGE DR NE STE E 20

City ATLANTA	State GA	Zip Code 30328	Foreign Country
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Relationship N/A	Foundation Status 509(a)(1)
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Purpose of grant/contribution General & Unrestricted	Amount 2,000
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Name

WEST VIRGINIA UNIV FOUNDATION INC

Street

ONE WATERFRONT PL 7TH FL

City MORGANTOWN	State WV	Zip Code 26501	Foreign Country
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Relationship N/A	Foundation Status 509(a)(1)
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Purpose of grant/contribution General & Unrestricted	Amount 3,000
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Name

WINSTON SCHOOL

Street

100 E LN

City SHORT HILLS	State NJ	Zip Code 07078	Foreign Country
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Relationship N/A	Foundation Status 509(a)(1)
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Purpose of grant/contribution General & Unrestricted	Amount 2,000
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Name**Street**

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status
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Purpose of grant/contribution	Amount 0
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Name**Street**

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status
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Purpose of grant/contribution	Amount 0
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