

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

**2007**

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 2007, or tax year beginning** \_\_\_\_\_, **2007, and ending** \_\_\_\_\_

**G** Check all that apply:  Initial return  Final return  Amended return  Address change  Name change

<b>Use the IRS label. Otherwise, print or type. See Specific Instructions.</b>	Name of foundation <b>Infinite Family</b>	<b>A</b> Employer identification number 06-1533274
	Number and street (or P.O. box number if mail is not delivered to street address) Room/suite P.O. Box 2027	<b>B</b> Telephone number (see the instructions) (646) 736-0276
	City or town State ZIP code New York NY 10108	<b>C</b> If exemption application is pending, check here <input type="checkbox"/> <b>D 1</b> Foreign organizations, check here <input type="checkbox"/> <b>2</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> <b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> <b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input checked="" type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" 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		
<b>I</b> Fair market value of all assets at end of year (from Part II, column (c), line 16) \$ 167,323.	<b>J</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	

	Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see the instructions).)</i>	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>R E V E N U E</b>	<b>1</b> Contributions, gifts, grants, etc., received (att sch)	234,043.			
	<b>2</b> Ck <input type="checkbox"/> if the foundn is not req to att Sch B				
	<b>3</b> Interest on savings and temporary cash investments	1,422.	1,422.		
	<b>4</b> Dividends and interest from securities				
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain/(loss) from sale of assets not on line 10				
	<b>b</b> Gross sales price for all assets on line 6a				
	<b>7</b> Capital gain net income (from Part IV, line 2)			29.	
	<b>8</b> Net short-term capital gain				
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less: Cost of goods sold					
<b>c</b> Gross profit/(loss) (att sch)					
<b>11</b> Other income (attach schedule) See Line 11 Stmt	9,424.				
<b>12 Total.</b> Add lines 1 through 11	244,889.	1,451.			
<b>A D M I N I S T R A T I V E O P E R A T I N G A N D E X P E N S E S</b>	<b>13</b> Compensation of officers, directors, trustees, etc.	0.			
	<b>14</b> Other employee salaries and wages	67,875.			67,875.
	<b>15</b> Pension plans, employee benefits	2,471.			2,471.
	<b>16a</b> Legal fees (attach schedule)				
	<b>b</b> Accounting fees (attach sch) L-16b.Stmt	8,278.			8,278.
	<b>c</b> Other prof fees (attach sch) L-16c.Stmt	45,063.			45,063.
	<b>17</b> Interest				
	<b>18</b> Taxes (attach schedule) 4940.(a). tax				
	<b>19</b> Depreciation (attach sch) and depletion L-19.Stmt	4,665.			
	<b>20</b> Occupancy				
	<b>21</b> Travel, conferences, and meetings	15,718.			15,718.
	<b>22</b> Printing and publications	2,901.			2,901.
	<b>23</b> Other expenses (attach schedule) See Line 23 Stmt	16,758.	92.		16,666.
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	163,729.	92.		158,972.
	<b>25</b> Contributions, gifts, grants paid	6,556.			6,556.
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	170,285.	92.		165,528.	
<b>27</b> Subtract line 26 from line 12:					
<b>a Excess of revenue over expenses and disbursements</b>	74,604.				
<b>b Net investment income</b> (if negative, enter -0-)		1,359.			
<b>c Adjusted net income</b> (if negative, enter -0-)					



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 .....	64,783.	45,444.	45,444.
	2 Savings and temporary cash investments .....	34,527.	16,966.	16,966.
	3 Accounts receivable .....			
	Less: allowance for doubtful accounts .....			
	4 Pledges receivable .....	81,178.		
	Less: allowance for doubtful accounts .....	355.	81,178.	81,178.
	5 Grants receivable .....			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions) .....			
	7 Other notes and loans receivable (attach sch) .....			
	Less: allowance for doubtful accounts .....			
	8 Inventories for sale or use .....			
	9 Prepaid expenses and deferred charges .....	362.	362.	362.
	10a Investments – U.S. and state government obligations (attach schedule) .....			
	b Investments – corporate stock (attach schedule) L-10b Stmt .....	2,029.	1,080.	1,080.
	c Investments – corporate bonds (attach schedule) .....			
	11 Investments – land, buildings, and equipment: basis .....			
Less: accumulated depreciation (attach schedule) .....				
12 Investments – mortgage loans .....				
13 Investments – other (attach schedule) .....				
14 Land, buildings, and equipment: basis .....	27,656.			
Less: accumulated depreciation (attach schedule) L-14 Stmt .....	5,363.	3,297.	22,293.	
15 Other assets (describe .....				
16 <b>Total assets</b> (to be completed by all filers – see instructions. Also, see page 1, item I) .....	105,353.	167,323.	167,323.	
LIABILITIES	17 Accounts payable and accrued expenses .....	3,558.	305.	
	18 Grants payable .....			
	19 Deferred revenue .....			
	20 Loans from officers, directors, trustees, & other disqualified persons .....			
	21 Mortgages and other notes payable (attach schedule) .....			
	22 Other liabilities (describe .....			
	23 <b>Total liabilities</b> (add lines 17 through 22) .....	3,558.	305.	
NET ASSETS OR FUND BALANCES	<b>Foundations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	24 Unrestricted .....	37,076.	36,070.	
	25 Temporarily restricted .....	64,719.	130,948.	
	26 Permanently restricted .....			
	<b>Foundations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	27 Capital stock, trust principal, or current funds .....			
	28 Paid-in or capital surplus, or land, building, and equipment fund .....			
	29 Retained earnings, accumulated income, endowment, or other funds .....			
30 <b>Total net assets or fund balances</b> (see the instructions) .....	101,795.	167,018.		
31 <b>Total liabilities and net assets/fund balances</b> (see the instructions) .....	105,353.	167,323.		

**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	101,795.
2	Enter amount from Part I, line 27a .....	2	74,604.
3	Other increases not included in line 2 (itemize) .....	3	43.
4	Add lines 1, 2, and 3 .....	4	176,442.
5	Decreases not included in line 2 (itemize) .....	5	9,424.
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30 .....	6	167,018.

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

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a 42 Shares JP Morgan Chase Stock	D	12/21/06	06/22/07
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 2,072.		2,043.	29.
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	
a			29.
b			
c			
d			
e			

2 Capital gain net income or (net capital loss). <span style="float:right">[ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 ]</span>	2	29.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see the instructions). If (loss), enter -0- in Part I, line 8. <span style="float:right">[ ]</span>	3	

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

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

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

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

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2006	119,275.	87,274.	1.366673
2005	41,332.	162,691.	0.254052
2004	5,193.	96,162.	0.054003
2003	4,328.	94,502.	0.045798
2002	3,500.	75,330.	0.046462

2 Total of line 1, column (d)	2	1.766988
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	0.353398
4 Enter the net value of noncharitable-use assets for 2007 from Part X, line 5	4	74,964.
5 Multiply line 4 by line 3	5	26,492.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	14.
7 Add lines 5 and 6	7	26,506.
8 Enter qualifying distributions from Part XII, line 4	8	165,528.

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 the instructions)**

1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1. Date of ruling letter: _____ (attach copy of ruling letter if necessary – see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	14.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3 Add lines 1 and 2		3	14.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 <b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-		5	14.
6 Credits/Payments:			
a 2007 estimated tax pmts and 2006 overpayment credited to 2007	6 a		
b Exempt foreign organizations – tax withheld at source	6 b		
c Tax paid with application for extension of time to file (Form 8868)	6 c		
d Backup withholding erroneously withheld	6 d		
7 Total credits and payments. Add lines 6a through 6d		7	
8 Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached		8	
9 <b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter amount owed <i>See Cover Sheet</i>		9	14.
10 <b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	0.
11 Enter the amount of line 10 to be: <b>Credited to 2008 estimated tax</b> Refunded		11	

**Part VII-A Statements Regarding Activities**

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? <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>		X
c Did the foundation file <b>Form 1120-POL</b> for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation \$ 0. (2) On foundation managers \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If 'Yes,' attach a detailed description of the activities.</i>		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If 'Yes,' attach a conformed copy of the changes</i>		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If 'Yes,' attach the statement required by General Instruction T.</i>		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If 'Yes,' complete Part II, column (c), and Part XV</i>	X	
8 a Enter the states to which the foundation reports or with which it is registered (see the instructions) NY - New York		
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 <i>General Instruction G</i> ? <i>If 'No,' attach explanation</i>	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2007 or the taxable year beginning in 2007 (see instructions for Part XIV)? <i>If 'Yes,' complete Part XIV</i>		X
10 Did any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a schedule listing their names and addresses.</i> <i>See Attachment</i>	X	

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Form 990-PF (2007)

**Part VII-A Statements Regarding Activities Continued**

<b>11 a</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 instructions) .....	<b>11 a</b>		X
<b>b</b> If 'Yes', did the foundation have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, an annuities described in the attachment for line 11a? .....	<b>11 b</b>		
<b>12</b> Did the foundation acquire a direct or indirect interest in any applicable insurance contract? .....	<b>12</b>		X
<b>13</b> Did the foundation comply with the public inspection requirements for its annual returns and exemption application? .....	<b>13</b>	X	
Website address ..... ▶ <u>www.infinitefamily.org</u>			
<b>14</b> The books are in care of ▶ <u>Amy Conrad Stokes</u> Telephone no. ▶ <u>(646) 736-0276</u>			
Located at ▶ <u>Infinite Family, P.O. Box 2027, NY, NY</u> ZIP + 4 ▶ <u>10108</u>			
<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>		

**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>1 a</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 checked="" type="checkbox"/> Yes <input 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 the instructions)? .....			X
Organizations relying on a current notice regarding disaster assistance check here .....	▶ <input type="checkbox"/>		
<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 2007? .....			X
<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 2007, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2007? .....	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
If 'Yes,' list the years ▶ 20__ , 20__ , 20__ , 20__ .			
<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 the instructions.) .....			
<b>c</b> If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ▶ 20__ , 20__ , 20__ , 20__ .			
<b>3 a</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 2007 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 2007.</i> ) .....			
<b>4 a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? .....			X
<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 2007? .....			X

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

5a During the year did the foundation pay or incur any amount to:

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

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

5b X

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?  Yes  No

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

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

6b X

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If you answered 'Yes' to 6b, also file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

7b

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

**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
Amy Conrad Stokes P.O. Box 2027 NY NY 10108	Chair/Exec Dir 40.00	0.	0.	0.
Yvonne Keairns, PhD (from 12/07) P.O. Box 2027 NY NY 10108	Vice Chair 1.00	0.	0.	0.
Niven Postma (from 12/07) P.O. Box 2027 NY NY 10108	Secretary 1.00	0.	0.	0.
See Information about Officers, Directors, Trustees, Etc.		0.	0.	0.

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

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

Total number of other employees paid over \$50,000  None

**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 ..... **None**

**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 Infinite Family charitable expenditures	
-----	158,972.
2 Charitable Grantmaking	
-----	4,550.
3 Gifts to Indigent South African orphans	
-----	2,006.
4	
-----	
-----	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 NONE	
-----	0.
2	
-----	
All other program-related investments. See instructions.	
3	
-----	

**Total.** Add lines 1 through 3 ..... **None**

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**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see 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>1 a</b>	1,105.
<b>b</b> Average of monthly cash balances .....	<b>1 b</b>	72,346.
<b>c</b> Fair market value of all other assets (see instructions) .....	<b>1 c</b>	2,655.
<b>d Total</b> (add lines 1a, b, and c) .....	<b>1 d</b>	76,106.
<b>e</b> Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) .....	<b>1 e</b>	
<b>2</b> Acquisition indebtedness applicable to line 1 assets .....	<b>2</b>	
<b>3</b> Subtract line 2 from line 1d .....	<b>3</b>	76,106.
<b>4</b> Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) .....	<b>4</b>	1,142.
<b>5 Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 .....	<b>5</b>	74,964.
<b>6 Minimum investment return.</b> Enter 5% of line 5 .....	<b>6</b>	3,748.

**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.)

<b>1</b> Minimum investment return from Part X, line 6 .....	<b>1</b>	3,748.
<b>2a</b> Tax on investment income for 2007 from Part VI, line 5 .....	<b>2 a</b>	14.
<b>b</b> Income tax for 2007. (This does not include the tax from Part VI.) .....	<b>2 b</b>	
<b>c</b> Add lines 2a and 2b .....	<b>2 c</b>	14.
<b>3</b> Distributable amount before adjustments. Subtract line 2c from line 1 .....	<b>3</b>	3,734.
<b>4</b> Recoveries of amounts treated as qualifying distributions .....	<b>4</b>	
<b>5</b> Add lines 3 and 4 .....	<b>5</b>	3,734.
<b>6</b> Deduction from distributable amount (see instructions) .....	<b>6</b>	
<b>7 Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 .....	<b>7</b>	3,734.

**Part XII Qualifying Distributions** (see 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>1 a</b>	165,528.
<b>b</b> Program-related investments – total from Part IX-B .....	<b>1 b</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>3 a</b>	
<b>b</b> Cash distribution test (attach the required schedule) .....	<b>3 b</b>	
<b>4 Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 .....	<b>4</b>	165,528.
<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 instructions) .....	<b>5</b>	14.
<b>6 Adjusted qualifying distributions.</b> Subtract line 5 from line 4 .....	<b>6</b>	165,514.

**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 2006	(c) 2006	(d) 2007
<b>1</b> Distributable amount for 2007 from Part XI, line 7 .....				3,734.
<b>2</b> Undistributed income, if any, as of the end of 2006:				
<b>a</b> Enter amount for 2006 only .....			0.	
<b>b</b> Total for prior years: 20 ____, 20 ____, 20 ____				
<b>3</b> Excess distributions carryover, if any, to 2007:				
<b>a</b> From 2002 .....				0.
<b>b</b> From 2003 .....				0.
<b>c</b> From 2004 .....				0.
<b>d</b> From 2005 .....				28,935.
<b>e</b> From 2006 .....				119,358.
<b>f</b> Total of lines 3a through e .....	148,293.			
<b>4</b> Qualifying distributions for 2007 from Part XII, line 4: ▶ \$ 165,528.				
<b>a</b> Applied to 2006, but not more than line 2a .....				
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions) .....				
<b>c</b> Treated as distributions out of corpus (Election required — see instructions) .....				
<b>d</b> Applied to 2007 distributable amount .....				
<b>e</b> Remaining amount distributed out of corpus .....	165,528.			
<b>5</b> Excess distributions carryover applied to 2007 .....	3,734.			3,734.
<i>(If an amount appears in column (d), the same amount must be shown in column (a).)</i>				
<b>6 Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 .....	310,087.			
<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 .....				
<b>d</b> Subtract line 6c from line 6b. Taxable amount — see instructions .....		0.		
<b>e</b> Undistributed income for 2006. Subtract line 4a from line 2a. Taxable amount — see instructions .....			0.	
<b>f</b> Undistributed income for 2007. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2008 .....				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 instructions) .....				
<b>8</b> Excess distributions carryover from 2002 not applied on line 5 or line 7 (see instructions) .....	0.			
<b>9 Excess distributions carryover to 2008.</b> Subtract lines 7 and 8 from line 6a .....	310,087.			
<b>10 Analysis of line 9:</b>				
<b>a</b> Excess from 2003 .....	0.			
<b>b</b> Excess from 2004 .....	0.			
<b>c</b> Excess from 2005 .....	25,201.			
<b>d</b> Excess from 2006 .....	119,358.			
<b>e</b> Excess from 2007 .....	165,528.			

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

**1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2007, enter the date of the ruling ▶

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

	Tax year				(e) Total
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	
<b>2 a</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 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).)  
 Amy Conrad Stokes and Christopher M. Stokes

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**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

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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 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:







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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**  
**Supplementary Information for**  
**line 1 of Form 990, 990-EZ and 990-PF (see instructions)**

OMB No. 1545-0047

**2007**

<b>Name of organization</b> Infinite Family	<b>Employer identification number</b> 06-1533274
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**Organization type** (check one):

**Filers of:**

Form 990 or 990-EZ

**Section:**

- 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 organizations 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 Form 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests 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 Form 990-EZ, that received from any one contributor, during the year, some 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:** Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF) but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2007)

**Depreciation and Amortization  
(Including Information on Listed Property)**

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return

Infinite Family

Identifying number

06-1533274

Business or activity to which this form relates

Form 990-PF page 1

**Part I Election To Expense Certain Property Under Section 179**

*Note: If you have any listed property, complete Part V before you complete Part I.*

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	\$125,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	\$500,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2006 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2008. Add lines 9 and 10, less line 12	▶ 13	

**Note:** Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)** (See instructions.)

14	Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) and cellulosic biomass ethanol plant property placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

**Part III MACRS Depreciation (Do not include listed property.)** (See instructions)

**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2007	17	799.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	<input type="checkbox"/>	

**Section B – Assets Placed in Service During 2007 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only – see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property		22,491.	3.0 yrs	HY	SL	3,749.
b 5-year property		1,169.	5.0 yrs	HY	SL	117.
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

**Section C – Assets Placed in Service During 2007 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

**Part IV Summary** (see instructions)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations – see instructions	22	4,665.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

**Part V Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A – Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)**

<b>24a</b> Do you have evidence to support the business/investment use claimed? .....		<b>Yes</b>	<b>No</b>	<b>24b</b> If 'Yes,' is the evidence written? .....		<b>Yes</b>	<b>No</b>	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
<b>25</b> Special allowance for qualified Gulf Opportunity Zone property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) .....							<b>25</b>	
<b>26</b> Property used more than 50% in a qualified business use:								
<b>27</b> Property used 50% or less in a qualified business use:								
<b>28</b> Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 .....							<b>28</b>	
<b>29</b> Add amounts in column (i), line 26. Enter here and on line 7, page 1 .....							<b>29</b>	

**Section B – Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a)		(b)		(c)		(d)		(e)		(f)	
	Vehicle 1	Vehicle 2	Vehicle 3	Vehicle 4	Vehicle 5	Vehicle 6	Yes	No	Yes	No	Yes	No
<b>30</b> Total business/investment miles driven during the year ( <b>do not</b> include commuting miles) .....												
<b>31</b> Total commuting miles driven during the year .....												
<b>32</b> Total other personal (noncommuting) miles driven .....												
<b>33</b> Total miles driven during the year. Add lines 30 through 32 .....												
<b>34</b> Was the vehicle available for personal use during off-duty hours? .....												
<b>35</b> Was the vehicle used primarily by a more than 5% owner or related person? .....												
<b>36</b> Is another vehicle available for personal use? .....												

**Section C – Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions).

<b>37</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? .....	<b>Yes</b>	<b>No</b>
<b>38</b> Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners .....		
<b>39</b> Do you treat all use of vehicles by employees as personal use? .....		
<b>40</b> Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? .....		
<b>41</b> Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) .....		
<b>Note:</b> If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles.		

**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
<b>42</b> Amortization of costs that begins during your 2007 tax year (see instructions):					
<b>43</b> Amortization of costs that began before your 2007 tax year .....					<b>43</b>
<b>44 Total.</b> Add amounts in column (f). See the instructions for where to report .....					<b>44</b>

Form 990-PF, Page 1, Part I, Line 11

**Line 11 Stmt**

Other income:	Rev/Exp Book	Net Inv Inc	Adj Net Inc
<u>1/4 of 481(a) adj</u>			
<u>recognized ratably</u>			
<u>over 4 years; Form</u>			
<u>3115 filed in 2006</u>	9,424.		
Total	<u>9,424.</u>		

Form 990-PF, Page 1, Part I, Line 23

**Line 23 Stmt**

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
<u>Insurance</u>	1,450.			1,450.
<u>Postage &amp; Delivery</u>	801.			801.
<u>Noncapitalized</u>				
<u>Equip/software</u>	4,779.			4,779.
<u>Telephone, fax &amp; internet</u>	2,635.			2,635.
<u>Mentor training supplies</u>	2,500.			2,500.
<u>Program supplies</u>	1,166.			1,166.
<u>Office Supplies &amp; Exp</u>	3,427.	92.		3,335.
Total	<u>16,758.</u>	<u>92.</u>		<u>16,666.</u>

Form 990-PF, Page 2, Part III, Line 3

**Other Increases Stmt**

<u>Realized gain in 2007 for book purposes on</u>	
<u>investments carried at market value</u>	
<u>for GAAP, not recognized for tax</u>	
<u>purposes</u>	43.
Total	<u>43.</u>

Form 990-PF, Page 2, Part III, Line 5

**Other Decreases Stmt**

<u>481(a) adjustment for change to accrual</u>	
<u>accounting in 2006, all of which</u>	
<u>was recognized for book purposes</u>	
<u>in 2006, but is being recognized</u>	
<u>for tax purposes ratably over 4</u>	
<u>years. See Part 1, Line 11. Form</u>	
<u>3115 filed in 2006.</u>	9,424.
Total	<u>9,424.</u>

Form 990-PF, Page 6, Part VIII, Line 1

**Information about Officers, Directors, Trustees, Etc.**

(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
Person ... <input checked="" type="checkbox"/> Business ... <input type="checkbox"/> Katy Keck (from 12/07) P.O. Box 2027 NY NY 10108	Treasurer 1.00	0.	0.	0.
Person ... <input checked="" type="checkbox"/> Business ... <input type="checkbox"/> Claudia Ford (from 12/07) P.O. Box 2027 NY NY 10108	Board Member 0.25	0.	0.	0.
Person ... <input checked="" type="checkbox"/> Business ... <input type="checkbox"/> Nancy Muirhead P.O. Box 2027 NY NY 10108	Board Member 0.25	0.	0.	0.
Person ... <input checked="" type="checkbox"/> Business ... <input type="checkbox"/> Christopher Stokes (thru 11/07) P.O. Box 2027 NY NY 10108	Sec'y/Treas 0.25	0.	0.	0.
Person ... <input checked="" type="checkbox"/> Business ... <input type="checkbox"/> Alison Paul (thru 11/07) P.O. Box 2027 NY NY 10108	Asst Secretary 0.50	0.	0.	0.

Total

0. 0. 0.

Form 990-PF, Page 1, Part I, Line 16b

**L-16b Stmt**

Line 16b - Accounting Fees:		Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Name of Provider	Type of Service Provided				
Dan Farrell, CPA	Review Report	6,278.			6,278.
N. Cheng & Co.	Bookkeeping	2,000.			2,000.
Total		8,278.			8,278.

Form 990-PF, Page 1, Part I, Line 16c

**L-16c Stmt**

Line 16c - Other Professional Fees:		Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Name of Provider	Type of Service Provided				
Micael Holmstrom	Technology Svcs	37,863.			37,863.
Nat'l Mentoring P'ship	Background Checks	540.			540.
Gwyneth Leech	DVD Design	1,000.			1,000.
Shunamite Press	DVD Cover	300.			300.
Kristie Carter	Intern	3,000.			3,000.

Form 990-PF, Page 1, Part I, Line 16c

Continued

**L-16c Stmt**

<b>Line 16c - Other Professional Fees:</b>		<b>Amount Paid Per Books</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
<b>Name of Provider</b>	<b>Type of Service Provided</b>				
Coro Center	Intern	1,500.			1,500.
Shunamite Press	Website graphics	800.			800.
SurveyMonkey.com	Surveys	60.			60.
<b>Total</b>		<u>45,063.</u>			<u>45,063.</u>

Form 990-PF, Line 19

**Allocated Depreciation**

Description	Date Acquire	Cost or Basis	Prior Yr. Depr	Mthd	Life	Current Depr	Net Invest Income	Adjusted Net Income
Website	06/15/06	2500	250	SL	5.00	500		
Projector	12/30/05	801	240	SL	5.00	160		
Laptop	12/30/05	695	209	SL	5.00	139		
Adobe Platform Software	06/26/07	22491		SL	3.00	3749		
HP Laptop	04/03/07	1169		SL	5.00	117		
<b>Total</b>								

Form 990-PF, Page 2, Part II, Line 10b

**L-10b Stmt**

<b>Line 10b - Investments - Corporate Stock:</b>	<b>End of Year</b>	
	<b>Book Value</b>	<b>Fair Market Value</b>
72 Shares Old National Bancorp (year-end donation)	1,080.	1,080.
<b>Total</b>	<u>1,080.</u>	<u>1,080.</u>

Form 990-PF, Page 2, Part II, Line 14

**L-14 Stmt**

<b>Line 14b - Description of Land, Buildings, and Equipment</b>	<b>(a) Cost/Other Basis</b>	<b>(b) Accumulated Depreciation</b>	<b>(c) Book Value</b>
Office Equipment	2,665.	865.	1,800.
Website construction	2,500.	750.	1,750.
Communication Platform Software	22,491.	3,748.	18,743.
<b>Total</b>	<u>27,656.</u>	<u>5,363.</u>	<u>22,293.</u>

**Infinite Family**  
**EIN: 06-1533274**  
Attachment to Form 990-PF  
December 31, 2007

**Form 990-PF, Part VII-A, Question 10**

New substantial contributors for the year were:

Polyscope Action Fund, 454 West 46<sup>th</sup> Street, # 4DS, New York, NY 10036

The Planalp-Trevor Charitable Trust, 48 West 88<sup>th</sup> Street, New York, NY 10024

**Form 990-PF, Part VII-B, Question 5(c)**

Infinite Family made one expenditure responsibility grant in 2007, and has continuing expenditure responsibility under a capital grant made in 2006. The following information is provided as required by Treas. Reg. Section 53.4945-5(d). Copies of the expenditure responsibility grant agreements for each grant are attached.

**Grant to PolyScope Action Fund in 2006 (Continuing Expenditure Responsibility)**

1. Name and Address of Grantee: PolyScope Action Fund, a private foundation incorporated under the laws of New York, EIN: 20-3945917, Address: 454 W. 46<sup>th</sup> St. Apt. 4DS, New York, NY 10036.
2. Date of the Grant: March 17, 2006
3. Amount of the Grant: \$58,382.66
4. Purpose of the Grant: Capital Purposes. All grant funds must be used for charitable purposes within the meaning of I.R.C. Section 501(c)(3).
5. Amounts expended by Grantee based on the most recent report received from the Grantee: \$ 33,515
6. Whether the Grantee has diverted any portion of the funds from the purposes of the grant: No
7. The dates of any reports received from the Grantee: August 31, 2008
8. The date and results of any verification of the grantee's reports undertaken pursuant to and to the extent required under paragraph (c)(1) of this section by the grantor or by others at the direction of the grantor: The Grantor has no reason to doubt the accuracy or reliability of the grantee's reports, and therefore no verification is required under Treas. Reg. Section 53.4945-5(c).

**Infinite Family**  
**EIN: 06-1533274**  
Attachment to Form 990-PF  
December 31, 2007

**Form 990-PF, Part VII-B, Question 5(c) (cont'd)**

Grant to Nkosi's Haven:

1. Name and Address of Grantee: Nkosi's Haven, 23 Mitchell Street, Berea 2098, Johannesburg, South Africa. South African NPO# is 008-995.
2. Date of the Grant: June 1, 2007
3. Amount of the Grant: \$4,550
4. Purpose of the Grant: School uniforms, group extracurricular activities, repair and upgrade of computers and a computer center for use by orphans and vulnerable children. All grant funds must be used for charitable purposes within the meaning of I.R.C. Section 501(c)(3).
5. Amounts expended by Grantee based on the most recent report received from the Grantee: R31,905 (\$4,550)
6. Whether the Grantee has diverted any portion of the funds from the purposes of the grant: No
7. The dates of any reports received from the Grantee: September 4, 2008.
8. The date and results of any verification of the grantee's reports undertaken pursuant to and to the extent required under paragraph (c)(1) of this section by the grantor or by others at the direction of the grantor: The Grantor has no reason to doubt the accuracy or reliability of the grantee's reports, and therefore no verification is required under Treas. Reg. Section 53.4945-5(c).

**Infinite Family Grant Agreement**  
**Grantee: Nkosi's Haven**

**Grantee:**

**Organization Name:** Nkosi's Haven  
**Address:** 23 Mitchell Street  
**City, State, Zip:** Berea 2098, Johannesburg, South Africa

**Grant Administrator:** Gail Johnson  
**Phone:** 011 +27 (011) 726.7581  
**Email Address:** director@nkosishaven.org.za

**Grant:**

**Amount:** \$4,550 (approx. R31,850)  
**Purpose:** Support for Infinite Family program  
**Starting date:** June 1, 2007  
**Duration:** Through December 31, 2008

**Purpose of Grant and Beneficiaries:**

**1. Jump Start Fund**

**Purpose:** To support children and teens at Nkosi's Haven

Uses of Funds to include:

- Upgrades and improvements of computers, computer center and internet communications, including new headsets with microphones and individual computer lights
- Clothing and materials necessary for educational purposes
- Expenses related to group extracurricular activities

Projected number of community residents that will benefit: 30

**2. Net Fundi Coordination**

**Purpose:** To support children and teens at Nkosi's Haven

Uses of funds to include payment of expenses associated with the coordination and management of Net Buddy program, including:

- testing and maintaining equipment and internet connections,
- supervising Net Buddies, maintaining video conference privacy and enforcing "safe surfing" rules,
- providing support and appointment information to Net Families and Net Buddies,
- opening and locking the computer room,
- doing weekly computer tests,
- posting information in the secure, password protected Ezomndeni Net,

- posting information in the secure, password protected Ezomndeni Net,
- managing Net Buddy receipt of birthday gifts,
- identifying and training new Net Buddies, and
- documenting overall program participation and challenges, and reporting problems to IF staff.

Projected number of community residents that will benefit: 30

**Distribution of Funds:**

Payment of the grant funds will be made after receipt by the Grantor of a copy of this letter signed by an appropriate officer of your organization. Grant fund will be paid as follows, provided Nkosi's Haven is in compliance with the terms and conditions of this letter and previous related Grant Agreements with Infinite Family, at the time of the scheduled payment.

AMOUNT	PAYABLE WITHIN 5 DAYS OF	CONTINGENT UPON
<u>\$4,550</u>	<u>June 1, 2007</u>	<u>N/A</u>

**Terms governing SA Partner's use of the grant:**

1. Use of Grant Funds and Return of Unused Funds. Under United States law, these grant funds, and any income earned thereon, may be expended only for charitable or educational purposes. This grant is made for the purposes stated in this letter, and it is understood that these grant funds will be used for such purposes substantially in accordance with the approved budget. It is also understood that no substantial variances will be made from the approved budget without the prior approval in writing of the Grantor. Any grant funds, and income earned thereon, not expended or committed for the purposes of the grant within the next twelve months must be repaid to the Grantor.
2. Solicitation of Funds from Infinite Family volunteers. Grantee may not directly solicit Infinite Family volunteers, including Net Family mentors, for additional funding beyond what is provided through Infinite Family.
3. Required Reports. A written report, including financial and narrative statements, signed by the appropriate officer of your organization is to be furnished to the Grantor within three months of the close of each of your fiscal years in which you receive or expend any portion of the grant funds and each subsequent fiscal year until the grant funds (including income, if any, from such funds) are expended in full or the grant is otherwise terminated. (According to our records your fiscal year ends March 31.) In addition, semi-annual financial statements on the expenditures made as part of this grant agreement must be provided.

If required reports and statements are not submitted, the law requires that further payments, if any, under this grant or under any other grant by the Grantor to your organization must be withheld. Each report should contain a financial statement and a narrative account of what

made toward achieving the goals of the grant and a confirmation of your organization's compliance with the terms of the grant). Infinite Family reserves the right, in its sole discretion, to discontinue funding if it is not satisfied with the progress of the grant or the content of any written report.

The financial statement should reflect expenditures according to the categories of the approved budget as of the end of your fiscal year. The financial statement should reflect the categories of the approved budget and include only funds received and expended under this grant during the period covered by the report. Expenditures made in furtherance of the grant purposes should be charged against the grant, and records of such expenditures adequate to enable the use of such funds to be checked readily should be kept.

4. Separate Segregated Fund. You are required to maintain all unexpended grant funds at all times in a separate segregated fund dedicated solely to the purposes of the grant specified in this letter. The separate fund and the receipt and expenditure of such grant funds must be shown separately in your accounting records. Accounting records, as well as copies of the reports submitted to the Grantor, must be kept by your organization for at least four years after completion of the use of the grant funds and be made available to the Grantor for examination upon request.
5. Evaluation and Monitoring. The Grantor may monitor and conduct an evaluation of operations under this grant, which may include a visit from personnel of the Grantor to observe your organization's program, discuss the program with your organization's personnel, and review financial and other records and materials connected with the activities financed by this grant.
6. Publicity. The Grantor may include information on this grant in its periodic public reports.
7. Certification Regarding No Payments to Individual Beneficiaries. Your organization certifies that it will not make payments directly to individual beneficiaries or their caregivers.
8. Certification Regarding No Solicitation of Infinite Family Net Families: Your organization certifies that it will not directly solicit funds from Infinite Family adult mentors ("Net Families") corresponding with the youth being served by your organization.
9. Certification Regarding No Support of Terrorism. By countersigning this letter, your organization certifies that it does not and will not engage in any terrorist activities or knowingly provide material support or resources to any individual or entity, knowing or intending that they be used for the furtherance of any terrorist activities.
10. Certification Regarding Banking Relationship. Your organization certifies that the grant funds will be deposited at Standard Bank until expended in furtherance of this grant.
11. Prohibitions. Grant funds may not be used by your organization:

- (a) to carry on propaganda, or otherwise to attempt to influence any legislation (within the meaning of Section 4945(d)(1) of the Internal Revenue Code);
- (b) to influence the outcome of any specific public election or to carry on, directly or indirectly, any voter registration drive (within the meaning of Section 4945(d)(2) of the Internal Revenue Code);
- (c) to make any grant which does not comply with the requirements of Section 4945(d)(3) or (4) of the Internal Revenue Code;
- (d) to undertake any activity for any purpose other than one specified in Section 170(c)(2)(B) of the Internal Revenue Code; or
- (e) to make grants to individuals for travel, study or other similar purposes by such individuals (such as scholarships, fellowships or grants for research), unless such grants satisfy the requirements of Section 4945(g) of the IRC.

If this letter correctly sets forth your understanding of the terms of this grant, please indicate your organization's agreement to such terms by having the attached copy of this letter countersigned by an appropriate officer of your organization and returned to the Grantor. In addition, the signatures below acknowledge that both Infinite Family and Nkosi's Haven have signed a Memorandum of Understanding, dated November 1, 2006 whose terms are incorporated by reference into this grant agreement.

We hope that this grant will assist Nkosi's Haven to further the important work of your organization.

INFINITE FAMILY

By: AJS Amy Stokes

Title: EXECUTIVE DIRECTOR

ACCEPTED AND AGREED this 15 day of May, 2007  
Nkosi's Haven

BY:

Johnson

Signature:

Printed Name

Johnson

Director

Title

**Infinite Family Grant Agreement**  
**PolyScope Action Fund**

**Grantee:**

**Organization Name:** PolyScope Action Fund  
**Address:** 454 West 46<sup>th</sup> Street, 4DS  
**City, State, Zip:** New York, NY 10036

**Grant Administrator:** Amy Stokes  
**Phone:** 212.333.3925  
**Email Address:** polyscope@nyc.rr.com

**Grant:**

**Amount:** \$58,382.66  
**Purpose:** Capital Purposes  
**Starting date:** 3.1.2006  
**Duration:** NA

**Purpose of Grant and Beneficiaries:**

Grant funds are given for capital purposes to increase the capital the organization has available to use for charitable purposes. Grant funds may be held by the grantee and the income used for charitable purposes, or grant funds may be directly expended for charitable purposes if determined necessary by the Board of Directors of PolyScope Action Fund.

**Distribution of Funds:**

Payment of the grant funds will be made after receipt by the Grantor of a copy of this letter signed by an appropriate officer of your organization.

**Terms governing SA Partner's use of the grant:**

1. Use of Grant Funds and Return of Unused Funds. Under United States law, these grant funds, and any income earned thereon, may be expended only for charitable or educational purposes. This grant is made for the purposes stated in this letter, and it is understood that these grant funds will be used for such purposes. It is also understood that no substantial variances will be made without the prior approval in writing of the Grantor. Any grant funds, and income earned thereon, not expended or committed for the purposes of the grant must be repaid to the Grantor.
2. Required Reports. A written report, including financial and narrative statements, signed by the appropriate officer of your organization is to be furnished to the Grantor within three months of the close of the fiscal year within which you receive the grant funds, and for the subsequent two fiscal years.

If required reports and statements are not submitted, the law requires that further payments, if any, under this grant or under any other grant by the Grantor to your organization must be withheld. Each report should contain a financial statement and a narrative account of what was accomplished by the expenditure of grant funds (including a description of progress made toward achieving the goals of the grant and a confirmation of your organization's compliance with the terms of the grant). Infinite Family reserves the right, in its sole discretion, to discontinue funding if it is not satisfied with the progress of the grant or the content of any written report.

The financial statement should reflect expenditures according to the categories of the approved budget as of the end of your fiscal year. The financial statement should reflect the categories of the approved budget and include only funds received and expended under this grant during the period covered by the report. Expenditures made in furtherance of the grant purposes should be charged against the grant, and records of such expenditures adequate to enable the use of such funds to be checked readily should be kept.

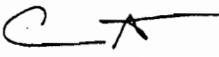
3. Separate Segregated Fund. You are required to maintain all unexpended grant funds at all times in a separate segregated fund dedicated solely to the purposes of the grant specified in this letter. The separate fund and the receipt and expenditure of such grant funds must be shown separately in your accounting records. Accounting records, as well as copies of the reports submitted to the Grantor, must be kept by your organization for at least four years after completion of the use of the grant funds and be made available to the Grantor for examination upon request.
4. Evaluation and Monitoring. The Grantor may monitor and conduct an evaluation of operations under this grant, which may include a visit from personnel of the Grantor to observe your organization's program, discuss the program with your organization's personnel, and review financial and other records and materials connected with the activities financed by this grant.
5. Publicity. The Grantor may include information on this grant in its periodic public reports.
6. Certification Regarding No Payments to Individual Beneficiaries. Your organization certifies that it will not make payments directly to individual beneficiaries or their caregivers.
8. Certification Regarding No Support of Terrorism. By countersigning this letter, your organization certifies that it does not and will not engage in any terrorist activities or knowingly provide material support or resources to any individual or entity, knowing or intending that they be used for the furtherance of any terrorist activities.
9. Certification Regarding Banking Relationship. Your organization certifies that the grant funds will be deposited at Commerce Bank, or an equivalent FDIC regulated institution, until expended in furtherance of this grant.

10. Prohibitions. Grant funds may not be used by your organization:
- (a) to carry on propaganda, or otherwise to attempt to influence any legislation (within the meaning of Section 4945(d)(1) of the Internal Revenue Code);
  - (b) to influence the outcome of any specific public election or to carry on, directly or indirectly, any voter registration drive (within the meaning of Section 4945(d)(2) of the Internal Revenue Code);
  - (c) to make any grant which does not comply with the requirements of Section 4945(d)(3) or (4) of the Internal Revenue Code;
  - (d) to undertake any activity for any purpose other than one specified in Section 170(c)(2)(B) of the Internal Revenue Code; or
  - (e) to make grants to individuals for travel, study or other similar purposes by such individuals (such as scholarships, fellowships or grants for research), unless such grants satisfy the requirements of Section 4945(g) of the IRC.

If this letter correctly sets forth your understanding of the terms of this grant, please indicate your organization's agreement to such terms by having the attached copy of this letter countersigned by an appropriate officer of your organization and returned to the Grantor.

We hope that this grant will assist PolyScope Action Fund to further the important work of your organization.

INFINITE FAMILY

By:   
\_\_\_\_\_  
Title: Treasurer

ACCEPTED AND AGREED this 1st day of March, 2006

PolyScope Action Fund

BY:   
\_\_\_\_\_  
Signature

Amy Conrad Stokes  
\_\_\_\_\_  
Printed Name

President  
\_\_\_\_\_  
Title

**Form 4562**

Infinite Family

Form 990PF - page 1

**Depreciation and Amortization Report**

Tax Year 2007

► Keep for your records

**2007**

06-1533274

Asset Description	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/Convention	Prior Depreciation	Current Depreciation
<b>DEPRECIATION</b>												
HP Laptop		04/03/07	1,169		100.00			1,169	5.00	SL/HY		117
Adobe Platform Software		06/26/07	22,491		100.00			22,491	3.00	SL/HY		3,749
<b>SUBTOTAL CURRENT YEAR</b>			23,660	0		0	0	23,660			0	3,866
<b>Projector</b>		12/30/05	801		100.00			801	5.00	SL/HY	240	160
Laptop		12/30/05	695		100.00			695	5.00	SL/HY	209	139
Website		06/15/06	2,500		100.00			2,500	5.00	SL/HY	250	500
<b>SUBTOTAL PRIOR YEAR</b>			3,996	0		0	0	3,996			699	799
<b>TOTALS</b>			27,656	0		0	0	27,656			699	4,665

Code: S = Sold, A = Auto, L = Listed, C = COGS

Form <b>872</b> (Rev. January 2001)	Department of the Treasury-Internal Revenue Service	In reply refer to:
<b>Consent to Extend the Time to Assess Tax</b>		Taxpayer Identification Number

Infinite Family

(Name(s))

taxpayer(s) of 454 W. 46th St. Apt. 4DS New York, NY 10036-9018

(Number, Street, City or Town, State, ZIP Code)

and the Commissioner of Internal Revenue consent and agree to the following:

(1) The amount of any Federal Chapter 42 Excise tax due on any return(s) made by or

(Kind of tax)

for the above taxpayer(s) for the period(s) ended December 31, 2008; December 31, 2007; December 31, 2008;

December 31, 2009; December 31, 2010

may be assessed at any time on or before May 15, 2015. However, if

(Expiration date)

a notice of deficiency in tax for any such period(s) is sent to the taxpayer(s) on or before that date, then the time for assessing the tax will be further extended by the number of days the assessment was previously prohibited, plus 60 days.

(2) The taxpayer(s) may file a claim for credit or refund and the Service may credit or refund the tax within 6 months after this agreement ends.

**MAKING THIS CONSENT WILL NOT DEPRIVE THE TAXPAYER(S) OF ANY APPEAL RIGHTS TO WHICH THEY WOULD OTHERWISE BE ENTITLED.**

YOUR SIGNATURE HERE → *AMS* 7-25-06

(Date signed)

SPOUSE'S SIGNATURE → \_\_\_\_\_ (Date signed)

TAXPAYER'S REPRESENTATIVE

SIGN HERE → \_\_\_\_\_ (Date signed)

CORPORATE NAME → INFINITE FAMILY

CORPORATE OFFICER(S) SIGN HERE → *AMS Amy Stokes* PRESIDENT 7-25-06

(Title) (Date signed)

→ \_\_\_\_\_ (Title) (Date signed)

INTERNAL REVENUE SERVICE SIGNATURE AND TITLE

*Chris G. Lerner* JUL 27 2006

(Division Executive Name - see instructions) (Division Executive Title - see instructions)

BY \_\_\_\_\_ (Authorized Official Signature and Title - see instructions) (Date signed)

<b>1. General Information</b>			
a. For the fiscal year beginning (mm/dd/yyyy) <u>1/1/</u> / <u>2007</u> and ending (mm/dd/yyyy) <u>12/31/07</u>			
b. Check if applicable for NYS: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial filing <input type="checkbox"/> Final filing <input type="checkbox"/> Amended filing <input type="checkbox"/> NY registration pending	c. Name of organization  <b>Infinite Family</b>		d. Fed. employer ID no. (EIN) (##-#####) <b>06-1533274</b>
	Number and street (or P.O. box if mail not delivered to street address) Room/suite <b>P.O. Box 2027</b>		e. NY State registration no. (##-##-##) <b>07-26-38</b>
	City or town, state or country and zip + 4 <b>New York, NY 10108</b>		f. Telephone number <b>646-736-0276</b>
			g. Email

<b>2. Certification - Two Signatures Required</b>			
We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.			
a. President or Authorized Officer	Signature	Printed Name	Title
b. Chief Financial Officer or Treasurer	Signature	Printed Name	Title
	Date	Date	Date

<b>3. Annual Report Exemption Information</b>	
a. <b>Article 7-A</b> annual report exemption (Article 7-A registrants and dual registrants) Check <input type="checkbox"/> if total contributions from NY State (including residents, foundations, corporations, government agencies, etc.) did not exceed \$25,000 <b>and</b> the organization did not use the services of a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during this fiscal year.  <b>NOTE:</b> An organization may also check the box to claim this exemption if no PFR or FRC was used <b>and</b> either: 1) the organization received an allocation from a federated fund, United Way or incorporated community appeal <b>and</b> contributions from all other sources did not exceed \$25,000 <b>or</b> 2) it received all or substantially all of its contributions from a single government agency to which it submitted an annual financial report similar to that required by Article 7-A).	
b. <b>EPTL</b> annual report exemption (EPTL registrants and dual registrants) Check <input type="checkbox"/> if total gross receipts for this fiscal year did not exceed \$25,000 <b>and</b> the assets (market value) of the organization did not exceed \$25,000 at any time during this fiscal year.	
For EPTL or Article-7A registrants claiming the annual report exemption under the one law under which they are registered and for dual registrants claiming the annual report exemptions under both laws, simply complete part 1 (General Information), part 2 (Certification) and part 3 (Annual Report Exemption Information) above. <i>Do not submit a fee, do not complete the following schedules and do not submit any attachments to this form.</i>	

<b>4. Article 7-A Schedules</b>	
If you did <b>not</b> check the Article 7-A annual report exemption above, complete the following for this fiscal year:	
a. Did the organization use a professional fund raiser, fund raising counsel or commercial co-venturer for fund raising activity in NY State? . . . . .	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
* If "Yes", complete Schedule 4a.	
b. Did the organization receive government contributions (grants)? . . . . .	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
* If "Yes", complete Schedule 4b.	

<b>5. Fee Submitted: See last page for summary of fee requirements.</b>	
Indicate the filing fee(s) you are submitting along with this form:	
a. Article 7-A filing fee . . . . .	\$ <u>10.</u>
b. EPTL filing fee . . . . .	\$ <u>50.</u>
c. <b>Total fee</b> . . . . .	\$ <u>60.</u>
<b>Submit only one check or money order for the total fee, payable to "NYS Department of Law"</b>	

<b>6. Attachments:</b> For organizations that are not claiming annual report exemptions under both laws, see last page for <b>required attachments</b> .
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August 7, 2008

Charities Bureau  
NYS Department of Law  
120 Broadway  
New York, NY 10271

Re: **Infinite Family**  
EIN: 06-1533274  
NYS Reg. #: 072638  
FYE: 12/31/07

Dear Sir or Madam:

The above-referenced exempt organization respectfully requests an additional extension of 3 months to November 15, 2008 to file its annual financial report with the Charities Bureau for the year ended December 31, 2007.

This request is being made due to the fact that information necessary to prepare a complete and accurate report has not yet been received. Attached is a copy of the Form 8868 request for a Federal extension to November 15, 2007.

Please call me at 917.757.5524 if you have any questions about the status of this process.

Thank you for your attention to this matter.

Sincerely,

Amy Conrad Stokes



May 15, 2008

Charities Bureau  
NYS Department of Law  
120 Broadway  
New York, NY 10271

Re: Infinite Family  
EIN: 06-1533274  
NYS Reg. #: 072638  
FYE: 12/31/07

Dear Sir or Madam:

Attached please find the IRS form 8868: Application for Extension of Time to File an Exempt Organization Return for Infinite Family.

We expect to file the tax form 990PF for Infinite Family by August 15, 2008. When complete, we will file this document accompanied by New York State Form Char 500: Annual Filing for Charitable Organizations to the Office of the Attorney General.

Please feel free to call me at 917.757.5524 if you have any questions about the status of this progress.

Thank you for your kind attention to this matter.

Sincerely,

A handwritten signature in black ink, appearing to read 'ACS'.

Amy Conrad Stokes  
Executive Director

**Schedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsels (FRC), Commercial Co-Venturers (CCV)**

If you checked the box in question 4.a. on page 1, complete the following schedule for each PFR, FRC or CCV that the organization engaged for fund raising activity in NY State: **NOT APPLICABLE**

**1. Type of fund raising professional (FRP):**

Professional fund raiser . . . . .	<input type="checkbox"/>
Fund raising counsel . . . . .	<input type="checkbox"/>
Commercial co-venturer . . . . .	<input type="checkbox"/>

**2. Name of FRP:**

\_\_\_\_\_

Number and street (or P.O. box if mail is not delivered to street address):

\_\_\_\_\_

City or town, state or country and zip + 4:

\_\_\_\_\_

**3. FRP telephone number:**

**4. Services provided by FRP (provide description):**

**5. Compensation arrangement with FRP (provide description):**

**6. Dates of contract** . . . . . (mm/dd/yyyy) **through** (mm/dd/yyyy)

**7. Amount paid to FRP** . . . . . \$ \_\_\_\_\_



**5. Fee Instructions**

The filing fee depends on the organization's Registration Type. For details on Registration Type and filing fees, see the Instructions for Form CHAR500.

**Organization's Registration Type    Fee Instructions**

- **Article 7-A**                      Calculate the Article 7-A filing fee using the table in **part a** below. The EPTL filing fee is \$0.
- **EPTL**                                Calculate the EPTL filing fee using the table in **part b** below. The Article 7-A filing fee is \$0.
- **Dual**                                Calculate both the Article 7-A and EPTL filing fees using the tables in **parts a and b** below. Add the Article 7-A and EPTL filing fees together to calculate the total fee. Submit a **single** check or money order for the total fee.

**a) Article 7-A filing fee**

Total Support & Revenue	Article 7-A Fee
more than \$250,000	\$25
up to \$250,000 *	\$10

\* Any organization that contracted with or used the services of a professional fund raiser (PFR) or fund raising counsel (FRC) during the reporting period must pay an Article 7-A filing fee of \$25, regardless of total support and revenue.

**b) EPTL filing fee**

Net Worth at End of Year	EPTL Fee
Less than \$50,000	\$25
\$50,000 or more, but less than \$250,000	\$50
\$250,000 or more, but less than \$1,000,000	\$100
\$1,000,000 or more, but less than \$10,000,000	\$250
\$10,000,000 or more, but less than \$50,000,000	\$750
\$50,000,000 or more	\$1500

**6. Attachments - Document Attachment Check-List**

Check the boxes for the documents you are attaching.

**For All Filers**

Filing Fee

Single check or money order payable to "NYS Department of Law"

Copies of Internal Revenue Service Forms

<input type="checkbox"/> IRS Form 990 <input type="checkbox"/> Schedule A to IRS Form 990 <input type="checkbox"/> Schedule B to IRS Form 990 <input type="checkbox"/> IRS Form 990-T	<input type="checkbox"/> IRS Form 990-EZ <input type="checkbox"/> Schedule A to IRS Form 990-EZ <input type="checkbox"/> Schedule B to IRS Form 990-EZ <input type="checkbox"/> IRS Form 990-T	<input checked="" type="checkbox"/> IRS Form 990-PF <input checked="" type="checkbox"/> Schedule B to IRS Form 990-PF <input type="checkbox"/> IRS Form 990-T
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**Additional Article 7-A Document Attachment Requirement**

Independent Accountant's Report

Audit Report (total support & revenue more than \$250,000)

Review Report (total support & revenue \$100,001 to \$250,000)

No Accountant's Report Required (total support & revenue not more than \$100,000)