Form **990-PF**

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

OMB No. 1545-0052

2009

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 cal	enda	r year 2009, or tax year beginning	, 2009,	and ending	,	
G Che	ck a	II that apply: Initial return Initi	al Return of a former pu	ıblic charity	Fin	al return
		Amended return	Address c	· —		
		<u> </u>	Address c			
Use th		Name of foundation		Α	Employer identification nu	mber
IRS lab	el.	Infinite Family			06-1533274	
Otherw		Number and street (or P.O. box number if mail is not	delivered to street address)	Room/suite B	Telephone number (see the	instructions)
prin		P.O. Box 618			(212) 400-74	16
or typ		City or town	State	ZIP code	• •	
Instructi	ana		State .	Į c	If exemption application is	
mstructi	0113.	Yonkers	NY	10705 D	1 Foreign organizations, che	ck here ►
H C	neck	type of organization: X Section 501	(c)(3) exempt private for	oundation	2 Foreign organizations mee	ting the 85% test, check
	_	ection 4947(a)(1) nonexempt charitable tr		rivate foundation	here and attach computation	on ĭ ▶
		, , , , ,			If private foundation status	s was terminated
		t II t (-) L' 1()	ounting method: Ca	ash X Accrual	under section 507(b)(1)(A)	
(1)	UIII F	art II, coluillii (c), lille 10)	Other (specify)	F	If the foundation is in a 60	
▶\$		82,899. (Part I,	column (d) must be on	cash basis.)	under section 507(b)(1)(B)	
Part I	Δ	nalysis of Revenue and		·		
· u···		xpenses (The total of amounts in	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		olumns (b), (c), and (d) may not neces-	expenses per books	income	income	for charitable
	S	arily equal the amounts in column (a)				purposes (cash basis only)
	(5	see the instructions).)				(casii basis Ulliy)
	1	Contributions, gifts, grants, etc, received (att sch)	176,977.			
	2	Ck ► if the foundn is not req to att Sch B	,,,,,			
	3	Interest on savings and temporary	25.	25.		
		cash investments				
	4	2111401140 4114 11101000 110111 0004111100 11111111	27.	27.		
		a Gross rents				
		Net rental income or (loss)				
R	6	a Net gain/(loss) from sale of assets not on line 10 .				
E V		b Gross sales price for all				
	_	assets on line 6a				
Ε	7	, ,				
N	8	Net short-term capital gain				
μ̈	9	Income modifications				
Ε	10	a Gross sales less returns and				
		allowances				
	- 1	b Less: Cost of				
		goods sold				
		c Gross profit/(loss) (att sch)				
	11	Other income (attach schedule)				
		See Line 11 Stmt	9,422.			
	12	Total. Add lines 1 through 11	186,451.	52.		
	13		-			
	14		87,585.			87,585.
		. ,	•			
	15	1 7 1 3	16,251.			16,251.
A D	16	a Legal fees (attach schedule)				
D M	ı	b Accounting fees (attach sch) L-1.6 b . S.tmt	5,658.			5,658.
I		c Other prof fees (attach sch) . L-1.6c. Stmt	57,063.			57,063.
O I P S	17		3,,005.			2.,000.
P Ś E T						
E T R R A A T T	18	, , ,				
A À	19		48 645			
l i		sch) and depletionL-19.Stmt	17,267.			
N V G E	20	, ,				
	21	Travel, conferences, and meetings	10,454.			10,454.
A E	22	Printing and publications	3,668.			3,668.
A E N X D P	23	- ·	•			
E		See Line 23 Stmt	17,118.	21.		17,097.
N S	24		_,,			2.,007.
Ĕ	24	Total operating and administrative expenses. Add lines 13 through 23	215,064.	21.		197,776.
S	25			41.		271,1/0.
	25	7 3 7 3 1	3,710.			3,710.
	26	Total expenses and disbursements.	0.0:	<u>~</u> =		000 100
		Add lines 24 and 25	218,774.	21.		201,486.
	27					
	i	a Excess of revenue over expenses				
		and disbursements	-32,323.			
	- 1	b Net investment income (if negative, enter -0-)		31.		
		C Adjusted net income (if negative, enter -0-)				
		, (

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010563 Department of the Treasury

Internal Revenue Service OGDEN UT 84201-0074

200912

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K IRS USE ONLY

29404-143-32320-0 061533274

A0197372 TE 211A В

For assistance, call: 1-877-829-5500

Notice Number: CP211A Date: June 28, 2010

Taxpayer Identification Number:

06-1533274

Tax Form: 990PF

Tax Period: December 31, 2009

186525.742659.0562.012 1 AB 0.360 375



INFINITE FAMILY 71 ROCKLAND AVE _10705-1602710

186525

APPLICATION FOR EXTENSION OF TIME TO FILE AN EXEMPT ORGANIZATION RETURN - APPROVED

We received and approved your Form 8868, Application for Extension of Time to File an Exempt Organization Return, for the return (form) and tax period identified above. Your extended due date to file your return is August 15, 2010.

When it's time to file your Form 990, 990-EZ, 990-PF or 1120-POL, you should consider filing electronically. Electronic filing is the fastest, easiest and most accurate way to file your return. For more information, visit the Charities and Nonprofit web at www.irs.gov/co. This site will provide information about:

- The type of returns that can be filed electronically,
- approved e-File providers, and
- if you are required to file electronically.

If you have any questions, please call us at the number shown above, or you may write us at the address shown at the top of this letter.

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TJ 44 200912 008215 670

1340 10705 K IRS USE ONLY 29404-233-89824-0 061533274 A0155882 TE 211A B

For assistance, call: 1-877-829-5500

Notice Number: CP211A Date: September 20, 2010

Taxpayer Identification Number:

06-1533274 Tax Form: 990PF

Tax Period: December 31, 2009

Department of the Treasury Internal Revenue Service Ogden UT 84201

128329.773963.0444.009 1 MB 0.382 375

INFINITE FAMILY
71 ROCKLAND AVE
YONKERS NY 10

ND AVE NY 10705-1602710



128329

APPLICATION FOR EXTENSION OF TIME TO FILE AN EXEMPT ORGANIZATION RETURN - APPROVED

We received and approved your Form 8868, Application for Extension of Time to File an Exempt Organization Return, for the return (form) and tax period identified above. Your extended due date to file your return is **November 15, 2010.**

When it's time to file your Form 990, 990-EZ, 990-PF or 1120-POL, you should consider filing electronically. Electronic filing is the fastest, casiest and most accurate way to file your return. For more information, visit the Charities and Nonprofit web at www.irs.gov/eo. This site will provide information about:

- The type of returns that can be filed electronically,
- approved e-File providers, and
- if you are required to file electronically.

If you have any questions, please call us at the number shown above, or you may write us at the address shown at the top of this letter.

Part		Balance Sheets Attached scriedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value (c	:) Fair Market Value
		Cash – non-interest-bearing	77,774.	21,012.	21,012.
		Savings and temporary cash investments	1,017.	21,844.	21,844.
	3	Accounts receivable ▶ 0.	_, , , ,		
	_	Less: allowance for doubtful accounts Pledges receivable	1,500.	0.	0.
	4	Pledges receivable 13,868.			
		Less: allowance for doubtful accounts	8,818.	13,868.	13,868.
	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) •			
A S		Less: allowance for doubtful accounts			
Š	8	Inventories for sale or use			
A S S E T	9	Prepaid expenses and deferred charges	326.	326.	326.
S		a Investments – U.S. and state government obligations (attach schedule)			
		b Investments — corporate stock (attach schedule) . L-10b . Stmt	1,308.	895.	895.
	(c Investments — corporate bonds (attach schedule)			
	11	Investments — land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule)			
		Investments – mortgage loans			
	13				
	14	Land, buildings, and equipment: basis ► <u>59,922.</u>			
		Less: accumulated depreciation (attach schedule) L-14. Stmt 34,968.	34,314.	24,954.	24,954.
	15 16	Other assets (describe)			
		see instructions, 7 wse, see page 1, item 1,		82,899.	82,899.
ŀ	17		0.	0.	
Á	18				
B I	19				
L	20				
Т	21	Mortgages and other notes payable (attach schedule)			
I E					
s	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
N F E U T N	24		54,189.	82,899.	
ΤŇ	25	Temporarily restricted	70,868.	0.	
D	26				
A B S A E L T A		Foundations that do not follow SFAS 117, check here ▶ and complete lines 27 through 31.			
ΤĀ	27				
SNC	28	Paid-in or capital surplus, or land, building, and equipment fund			
O E R S	29	Retained earnings, accumulated income, endowment, or other funds			
RS	30	Total net assets or fund balances (see the instructions)	125,057.	82,899.	
	31	Total liabilities and net assets/fund balances (see the instructions)	125,057.	82,899.	
Part	III	Analysis of Changes in Net Assets or Fund Balance			
1	Total	I net assets or fund balances at beginning of year — Part II, column of-year figure reported on prior year's return)	n (a), line 30 (must agree	e with 1	125,057.
2	2 Enter amount from Part I, line 27a				-32,323.
3	Other	increases not included in line 2 (itemize)		<u>2</u> 3	. ,
4	Add	lines 1, 2, and 3		4	92,734.
5		ases not included in line 2 (itemize) ► <u>See Other Decreases S</u>			9,835.
					82,899.

(a) List and describ	e the kind(s) of property sold (e.g., rea se; or common stock, 200 shares MLC	al estate, (b	How acquired — Purchase — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a					
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 (e) plus (f) m	
a					
b					
c d					
u e					
	ing gain in column (h) and owned by th (j) Adjusted basis as of 12/31/69	he foundation on 12/31/69 (k) Excess of column (i) over column (j), if any		(I) Gains (Colugain minus column (kan -0-) or Losses (fr	;), but not less
a					
b					
c					
d					
2 Capital gain net income or (net 3 Net short-term capital gain or (t capital loss). If gain, also enter the loss, enter loss) as defined in sections 1222(5) are	enter in Part I, line 7 er -0- in Part I, line 7	2		
If gain, also enter in Part I, line in Part I, line 8	e 8, column (c) (see the instructions). I	If (loss), enter -0-	3		
Part V Qualification Unde	r Section 4940(e) for Reduced	Tax on Net Investment	Income		
(For optional use by domestic private	e foundations subject to the section 494	40(a) tax on net investment in	come.)		
If 'Yes,' the foundation does not qual	nis part blank. tion 4942 tax on the distributable amountify under section 4940(e). Do not compose neach column for each year; see the interpretable of the	olete this part.		Yes	☐ No
(a) Base period years Calendar year (or tax year	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distributior umn (b) divided	
beginning in)	252 251	F.C.	703		4 460200
2008 2007	253,371. 165,514.		703. 964.		4.468388 2.207913
2007	119,275.		274.		1.366673
2005	41,332.	162,			0.254052
2004	5,193.		162.		0.054003
2 Total of line 1, column (d)			2		8.351029
3 Average distribution ratio for th number of years the foundation	e 5-year base period — divide the total n has been in existence if less than 5 y	I on line 2 by 5, or by the years	3		1.670206
4 Enter the net value of nonchari	table-use assets for 2009 from Part X,	line 5	4		89,165.
5 Multiply line 4 by line 3			5		148,924.
6 Enter 1% of net investment inc	come (1% of Part I, line 27b)		6		0.
7 Add lines 5 and 6					
• F 1 PC: P1P P			7		148,924.
	om Part XII, line 4		8		206,392.

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see the instruct	ions)		
1 a	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 instr.)			
ŀ	b Domestic foundations that meet the section 4940(e) requirements in Part V,			0.
	check here . ► X 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, column (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3				0.
J	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4			0.
-				0.
2				0.
6	Credits/Payments:			
	a 2009 estimated tax pmts and 2008 overpayment credited to 2009			
t	b Exempt foreign organizations — tax withheld at source			
(c Tax paid with application for extension of time to file (Form 8868)			
_	d Backup withholding erroneously withheld			
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			0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			0.
	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities			
1 a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
ŀ	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes			
_	(see the instructions for definition)?	1b		Х
	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?	1 c		X
(d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation \stacks \\$ 0. (2) On foundation managers \stacks \\$ 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?	2		х
	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? <i>If 'Yes,' attach a conformed copy of the changes</i>	3		х
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
	b If 'Yes,' has it filed a tax return on Form 990-T for this year?	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	-	х
_	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:			
	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? 	6	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	Х	
8 8	a Enter the states to which the foundation reports or with which it is registered (see the instructions) ▶			
	NY - New York			
ŀ	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	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(i)(3) or 4942(i)(5)			
-	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 2009 or the taxable year beginning in 2009 (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		Х

BAA Form **990-PF** (2009)

Par	t VII-A	Statements Regarding Activities Continued			
11	At any within t	time during the year, did the foundation, directly or indirectly, own a controlled entity he meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		x
12		foundation acquire a direct or indirect interest in any applicable insurance contract before 17, 2008?	12		х
	Did the Website	foundation comply with the public inspection requirements for its annual returns and exemption application?		х	
14	The boo	oks are in care of ► Amy Conrad Stokes Telephone no. ► (212)			
15	Section	d at Infinite Family, P.O. Box 618, Yonkers NY ZIP + 4 10705 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here		▶	П
	and ent	ter the amount of tax-exempt interest received or accrued during the year			
Par	t VII-B	Statements Regarding Activities for Which Form 4720 May Be Required			
	File Fo	rm 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 a		the year did the foundation (either directly or indirectly):			
	(1) Eng	gage in the sale or exchange, or leasing of property with a disqualified person? Yes x No			
	disc	row money from, lend money to, or otherwise extend credit to (or accept it from) a qualified person?			
		nish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay	y compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No			
	(5) Tra	Insfer any income or assets to a disqualified person (or make any of either available the benefit or use of a disqualified person)?			
	foli	ree to pay money or property to a government official? (Exception. Check 'No' if the ndation agreed to make a grant to or to employ the official for a period after termination government service, if terminating within 90 days.)			
ŀ	If any a Regulat	answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in tions section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)?	1 b		х
	Organiz	zations relying on a current notice regarding disaster assistance check here			
(Did the that we	foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, re not corrected before the first day of the tax year beginning in 2009?	1 c		x
2		on failure to distribute income (section 4942) (does not apply for years the foundation was a operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
á	and 6e,	end of tax year 2009, did the foundation have any undistributed income (lines 6d , Part XIII) for tax year(s) beginning before 2009?			
	If 'Yes,'	list the years • 20_ , 20_ , 20			
ŀ	Are the	re any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
		g to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to s listed, answer 'No' and attach statement — see the instructions.)	2b		
(-	rovisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
		_ , 20 , 20 , 20			
38	Did the	foundation hold more than a 2% direct or indirect interest in any business ise at any time during the year?			
ł	or disquest by the (did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation ualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to	26		
4 a		ine if the foundation had excess business holdings in 2009.) foundation invest during the year any amount in a manner that would jeopardize its	3b		
		ble purposes?	4a		Х
ŀ	ieopard	foundation make any investment in a prior year (but after December 31, 1969) that could lize its charitable purpose that had not been removed from jeopardy before the first day of			7-
	tne tax	year beginning in 2009?	4b		Х

BAA Form **990-PF** (2009)

Part VII-B Statements Regarding Activit	ies for Which Form	n 4720 May Be Req	uired (continued)		
5a During the year did the foundation pay or incur (1) Carry on propaganda, or otherwise attemp	-	(section 4945(e))?	Yes X	No	
(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registra	No				
(3) Provide a grant to an individual for travel,	No				
(4) Provide a grant to an organization other th in section 509(a)(1), (2), or (3), or section	an a charitable etc. ord	anization described		No	
(5) Provide for any purpose other than religious educational purposes, or for the prevention	is charitable scientific	literary or		No	
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in				No	
(see instructions)?				5b	
Organizations relying on a current notice regar	ding disaster assistance	e check here			
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure respons	ibility for the grant?		Yes	No	
If 'Yes,' attach the statement required by Regu	lations section 53.4945-	·5(d).			
6a Did the foundation, during the year, receive an on a personal benefit contract?			Yes X	No	
b Did the foundation, during the year, pay premit	ums, directly or indirectly	y, on a personal benefit	contract?	6b	X
If 'Yes' to 6b, file Form 8870. 7a At any time during the tax year, was the foundation.	ation a party to a prohib	uitad tay chalter transact	ion? Vos V	No.	
b If yes, did the foundation receive any proceeds				7b	
Part VIII Information About Officers, D					
and Contractors					
1 List all officers, directors, trustees, foundation	n managers and their co		ıctions).		
(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 according other allowand	
Amy Conrad Stokes					
P.O. Box 618	Chair/Exec Dir/Sec				
Yonkers NY 10705	40.00	0.	6,133.		0.
Yvonne Keairns, PhD P.O. Box 618	Vice Chair				
Yonkers NY 10705	0.25	0.	0.		0.
Katy Keck					
P.O. Box 618	Treasurer				
Yonkers NY 10705	10.00	0.	0.		0.
See Information about Officers, Directors, Trustees, Etc.					
		0.	0.		0.
2 Compensation of five highest-paid employees	<u> </u>				
(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 according other allowand	
Dana E. Gold			h		
P.O. Box 618	Program Dir				_
Yonkers NY 10705	40.00	51,370.	6,788.		0.
	-				
0					
0					
	-				
0	-				
Total number of other employees paid over \$50,000			·	ı	None

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid	233274 Page 7 Employees,
and Contractors (continued) 3 Five highest-paid independent contractors for professional services – (see instructions). If none,	
enter 'NONE.'	T 110
(a) Name and address of each person paid more than \$50,000 (b) Type of service NONE	(c) Compensation
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	-
2 Gifts to Indigent South African Orphans	197,776.
3	3,710.
	-
4	_
Part IX-B Summary of Program-Related Investments (see instructions)	. 1
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. 1 Enhancement of communications technology platform to enable US mentors to communicate with AIDS-orphaned	Amount - -
children in South Africa 2	4,906.
All other program-related investments. See instructions.	
Total. Add lines 1 through 3	4,906.
BAA	Form 990-PF (2009)

Forr	n 990-PF (2009) Infinite Family	06-1533274	Page 8
Pa	Minimum Investment Return (All domestic foundations must complete this part see instructions.)	. Foreign founda	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes:	1.	1 100
	a Average monthly fair market value of securities		1,102.
	b Average of monthly cash balances		84,901. 4,520.
	c Fair market value of all other assets (see instructions)		90,523.
	e Reduction claimed for blockage or other factors reported on lines 1a and 1c	I a	90,523.
,	(attach detailed explanation)		
2		2	
3			90,523.
_		3	90,323.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	1,358.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		89,165.
6	Minimum investment return. Enter 5% of line 5		4,458.
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private of	nerating founds	tions
ıa	and certain foreign organizations check here ► and do not complete this	part.)	10115
1	Minimum investment return from Part X, line 6		4,458.
2	a Tax on investment income for 2009 from Part VI, line 5	0.	
	b Income tax for 2009. (This does not include the tax from Part VI.)		
	c Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4,458.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	4,458.
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	4,458.
Pa	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc. purposes:		
;	a Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1a	201,486.
1	b Program-related investments — total from Part IX-B	1b	4,906.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required)	3a	
	b Cash distribution test (attach the required schedule)		
4			206,392.
	•		
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)	5	0.
6			206,392.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating when calculating of tax in those years	ether the foundatio	n

BAA Form **990-PF** (2009)

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1	Distributable amount for 2009 from Part XI,				
_	line 7				4,458.
	Undistributed income, if any, as of the end of 2009:				
	a Enter amount for 2008 only			0.	
	b Total for prior years: 20, 20, 20 Excess distributions carryover, if any, to 2009:				
	a From 2004				
,	b From 2005				
	c From 2006				
	d From 2007				
	e From 2008				
	f Total of lines 3a through e	560,629.			
	Qualifying distributions for 2009 from Part	300,023.			
•	XII, line 4: ► \$ 206,392.				
	a Applied to 2008, but not more than line 2a				
	b Applied to undistributed income of prior years (Election required — see instructions)				
•	c Treated as distributions out of corpus (Election required — see instructions)				
	d Applied to 2009 distributable amount				
	e Remaining amount distributed out of corpus	206,392.			
5	Excess distributions carryover applied to 2009	4,458.			4,458.
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
	(2),,				
6	Enter the net total of each column as indicated below:				
	a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	762,563.			
	b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
	c Enter the amount of prior years' undistribut-				
	ed 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 Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
1	f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010				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 2004 not applied on line 5 or line 7 (see instructions)	0.			
9	Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	762,563.			
10	Analysis of line 9:	.02,505.			
	a Excess from 2005 17,911.				
	b Excess from 2006 119,358.				
	c Excess from 2007 165,528.				
	d Excess from 2008 253,374.				
	e Excess from 2009 206,392.				
_					

rt XIV Private Operating Foundation					N/A
a If the foundation has received a ruling or dete is effective for 2009, enter the date of the rul	ing				
b Check box to indicate whether the foundation		ating foundation de		4942(j)(3) or	4942(j)(5)
a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
985% of line 2a					
Qualifying distributions from Part XII, line 4 for each year listed					
Amounts included in line 2c not used directly for active conduct of exempt activities					
Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
Complete 3a, b, or c for the alternative test relied upon:					
'Assets' alternative test — enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
'Support' alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Supplementary Information (C assets at any time during the	Complete this	part only if the	organization ha	d \$5,000 or more	e in
Information Regarding Foundation Manager List any managers of the foundation who have close of any tax year (but only if they have co Amy Conrad Stokes	e contributed mor	e than 2% of the to an \$5,000). (See s	otal contributions rece section 507(d)(2).)	ived by the foundation	on before the
List any managers of the foundation who owr a partnership or other entity) of which the foundation who a partnership or other entity) of which the foundation who are the foundation who are the foundation who own a partnership or other entity) of which the foundation who own a partnership or other entity) of which the foundation who own a partnership or other entity) of which the foundation who own a partnership or other entity) of which the foundation who own a partnership or other entity) of which the foundation who own a partnership or other entity) of which the foundation who own a partnership or other entity) of which the foundation who own a partnership or other entity) of which the foundation who own a partnership or other entity) of which the foundation who own a partnership or other entity) of which the foundation who own a partnership or other entity or oth	n 10% or more of t undation has a 109	the stock of a corp % or greater interes	oration (or an equally st.	large portion of the	ownership of
Information Regarding Contribution, Grant, Check here X if the foundation only mal requests for funds. If the foundation makes g complete items 2a, b, c, and d.	kes contributions t ifts, grants, etc, (s	o preselected char see instructions) to	itable organizations a individuals or organi	and does not accept zations under other o	unsolicited conditions,
The name, address, and telephone number o	of the person to wh	nom applications sh	nould be addressed:		
The form in which applications should be sub	omitted and inform	ation and materials	s they should include	:	
Any submission deadlines:					
Any restrictions or limitations on awards, suc	th as by geographi	ical areas, charitab	ole fields, kinds of ins	titutions, or other fac	ctors:

3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year				
Gifts to 135 indigent South			Gifts primarily	
African children orphaned as		Indi-	of clothing (winter	
a result of AIDS	None	viduals	vests)	3,710
Johannesburg, South Africa				
The South African children				
were provided				
with gifts of clothing,				
food, school supplies, etc.				
The average total				
gift per child was less				
than \$ 30, and for no				
child did the				
total gift exceed \$ 1,000.				
None of the children				
are disqualified				
persons with respect to				
Infinite Family.				
Total			► 3a	3,710.
b Approved for future payment				3,710
NONE				
NONE				
Tatal			<u> </u>	
Total)

Form 990-PF (2009) Infinite Family

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded	by section 512, 513, or 514	
1 Program service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
					(000 000 000000)
a b					
· ·					
·					
<u> </u>					
ef					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	25.	
4 Dividends and interest from securities			14	27.	
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					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			1		
11 Other revenue:					
a_481(a) Adj for 2009					9,422.
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)				52.	9,422.
13 Total. Add line 12, columns (b), (d), and (e)					9,474.
(See worksheet in the instructions for line 13 to verify cal	culations)				

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

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See the instructions.)
.1(a)	Line 11(a) consists of 1/4 of the 481(a) adjustment to change
(/	accounting method from cash to accrual accounting in 2006.
	The total adjustment was for a \$ 37,694 increase in income, which
	is being recognized ratably for tax purposes over a 4 year
	period. Form 3115 was filed in 2006.
	The 2006 \$ 37,694 adjustment represents a pledge receivable of
	\$ 50,000 and offsetting accounts payable of \$ 12,306.
	The pro-rata portion of the pledge receivable being recognized
	as income in 2009 is a \$ 12,500 donation for use in Infinite
	Family programs to connect African orphans with American mentors.
	The entire donation was used for program purposes and contributes
	directly in its entirety to Infinite Family's mission.

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

1 Did	the organization	directly o	or indirectly e	ngage in a	ny of the foll	owing with a	any	other organization			Yes	No
deso relat	cribed in section sing to political o	501(c) ot rganizatio	f the Code (ot ons?	ther than s	ection 501(c))(3) organiza	ation	ns) or in section 5	27,			
	sfers from the re	-		a nonchar	itable exemp	t organizatio	on o	f:				
												Х
										1a (2)		X
	er transactions:											
٠.												X
												X
٠,												X
												X
	-											X
` '				•	· ·					, ,		x
					•					<u> </u>		
d If the the cany	e answer to any goods, other ass transaction or st	of the ab ets, or se paring ar	ove is 'Yes,' o ervices given rangement, sl	complete t by the rep how in colu	he following orting founda umn (d) the v	schedule. Cation. If the fivalue of the	olun foun	nn (b) should alwadation received leds, other assets, o	lys show the fail ss than fair mar or services recei	r market value ket value in ved.	of	
(a) Line no					ble exempt orga		goo	(d) Description of tra			ngement	is .
•	, ,		, ,									
desc	e foundation direction in section es,' complete the	501(c) of	f the Code (ot	ated with, other than s	or related to, ection 501(c)	one or mor (3)) or in se	e ta: ectio	x-exempt organiza n 527?	ations	Yes	x	No
5	(a) Name of or		_	(b) Type of or	ganization		(c) Description o	f relationship		
					, ,,	<u> </u>						
										·		
1 :												
Under pe complete	nalties of perjury, I de . Declaration of prepa	clare that I rer (other th	have examined the han taxpayer or fi	nis return, inc duciary) is ba	luding accompan sed on all inform	ying schedules ation of which p	and s orepai	statements, and to the b rer has any knowledge.	est of my knowledge	and belief, it is true	e, correc	et, and
, 									>			
Sig	nature of officer or tru	stee					Т	Date	Title			
	Preparer's							Date	Check if	Preparer's Identify (See Signature in		
Paid Pre-	signature	Danie	el M. Fa	rrell,	CPA		_ :	11/13/10	self- employed ► X			
parer's		Danie	el M. Fai	rrell,	CPA	·			EIN ►			
Use Only	yours if self- employed),	420 V	West 47tl	n Stree	et, Suit	e 4E						_
	address, and ZIP code	New Y	York			N.	Y :	10036	Phone no. ►			
BAA										Form 99	0-PF ((2009)

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

													Yes	No
1 Did th	he organization	directly of	or indirec	tly enga	ge in any	of the fo	llowing wi	ith any	other organizate	on For			-	
relati	ng to political or	ganizati	ons?	ie (otilei	man sec	.11011 301 (0	.)(3) Orga	IIIZalio	ins) or in section	327,			130	
a Trans	sfers from the re	porting f	foundatio	n to a no	oncharita	ble exem	pt organiz	ation o	of:			ELECT 1		
(1)	Cash											1a(1)		Х
														Х
	r transactions:											Federal o	J-14-	10
(1) S	Sales of assets to	o a nonc	haritable	exempt	organiza	ation		,				1b(1)		Х
					-									Х
(3) F	Rental of facilities	s, equipr	ment, or	other as	sets									Х
														Х
		_												X
	_													Х
				•		•								X
0.114.		5 q a . p o .	,	.g, .	oo.	0.0, 0. pa								
d If the the g	answer to any o	of the ab ets, or se	ove is 'Y ervices gi	es,' com	plete the he report	following ing found	schedule ation. If th	. Colui ne four	mn (b) should alv	vays show less than fa	the fair n iir maṛke	narket value t _. value in	of	
								ne god	ds, other assets,					
(a) Line no.	(b) Amount in	voived	(c) l	vame or no	ncharitable	exempt org	anization	-	(d) Description of t	ransters, trans	sactions, ar	nu snaring arran	gement	<u>s</u>
		-						-						
					-									275
	1													
								_						
			_											
_	10													
							_				5270	2777		
										4.		_		
2a Is the	e foundation dire	ctly or in	ndirectly a fithe Cod	affiliated le (other	with, or	related to	, one or n	nore ta n sectio	ax-exempt organi on 527?	zations		Yes	X	Nο
	s,' complete the				illair see	11011 501 (0	2)(0)) 01 11	1 3000	011 027			🗀 100	21	. 10
DII 10	(a) Name of org			iic.	(b)	Type of o	rganizatio	nn .		(c) Descri	ntion of r	elationship		
	(a) Name of or	garnzanc	711	11	(6)	турс ого	rgariizatic	211		(c) Desert	311011 01 1	eración isi np		
	- X	_						_	·					
	- W				_						-			_
							_				***		_	
1							and a second section at		 	a bank of marries	anuladaa n	ad halvaf it is to		ct and
Under pen complete.	alties of perjury, I dea Declaration of prepar	clare that I er (other th	have exam nan taxpaye	iined this re er or fiducia	eturn, includ iry) is based	ing accompa I on all inforr	nation of wh	ules and ich prepa	statements, and to th arer has any knowledç	e best of my ki e.	nowledge a	na beliet, it is tru	e, corre	et, and
										•				
·	nature of officer or true	stee /)						Date	Title				
J.g.				11	,	7	20		Date 11/15/24	in	Pı	reparer's Identify	ing num	ber
Paid	Preparer's signature	all	aucu	I U	1-12	and	ef		11/2/20	Check if self-	(5	See Signature in	the inst	rs)
Pre-	signature	Danie	el M.	Parre		PA	<u> </u>		41/11/10	employed	► X			
parer's Use	Firm's name (or yours if self.	Danie		Farre		PA				EIN ►			_	111-0-4
Only	employed), address, and	420 V	√est 4	7th S	Street	,_Suit	e 4E							
<u> </u>	ZIP code	New Y	York					NΥ	10036	Phone no	. •			
2 Δ Δ												Form 99	0-PF	(2009)

Form **4562**

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

 OMB No. 1545-0172

2009

Attachment Sequence No. **67**

Name(s) shown on return

Infinite Family

Business or activity to which this form relates

Identifying number 06-1533274

For	m 990-PF page 1							
Par		ense Certain I	Property Under Sec complete Part V before	ction 179	rt I			
1	Maximum amount. See the						1	\$250,000.
2	Total cost of section 179 pr	operty placed in s	service (see instructions)				2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)							\$800,000.
4	Reduction in limitation. Sub	tract line 3 from I	line 2. If zero or less, ent	ter -0			4	
5	Dollar limitation for tax year separately, see instructions	r. Subtract line 4	from line 1. If zero or les	ss, enter -0 If m	arried filing		5	
6			·····	(b) Cost (business		(c) Elected cost	,	
	(α)	Description of property		(b) Cost (business	use orny)	(C) Liected cost		
7	Listed property. Enter the a	mount from line 2	29		7			
8	Total elected cost of section						8	
9	Tentative deduction. Enter t						9	
10	Carryover of disallowed dec		-				10	
11	Business income limitation.		•	•	-	-	11	
12 13							12	
	: Do not use Part II or Part II				- 13			
Par			ce and Other Depre		t include lister	d proporty) (S	coo inc	tructions)
							DEC IIIS	iructions.)
14	Special depreciation allowa tax year (see instructions)	nce for qualified p	property (other than liste	d property) place	d in service d	uring the	14	
15	Property subject to section					_	15	
	Other depreciation (including						16	
Par			nclude listed property.) (S					
	15110 206100		Sectio	•				
17	MACRS deductions for asse	ets placed in servi					17	16,149.
	If you are electing to group	·					,	<u>.</u>
10	asset accounts, check here	assets place	u in service during the ta			al ►		
		 Assets Placed 	in Service During 2009	Tax Year Using t	he General De	preciation Sy	stem	
	(a) Classification of property	(b) Month and year placed	(c) Basis for depreciation (business/investment use	(d) Recovery period	(e) Convention	(f) Method		(g) Depreciation deduction
	olassification of property	in service	only — see instructions)	recovery period	Convention	Wictiou		deddellori
	3-year property		4,906.	3.0 yrs	HY	S/L		818.
	5-year property		3,000.	5.0 yrs	HY	S/L		300.
	: 7-year property							
	10-year property							
	15-year property							
	20-year property							
	25-year property			25 yrs	307	S/L		
r	Residential rental property			27.5 yrs	MM	S/L		
<u> </u>	Nonresidential real			27.5 yrs	MM	S/L		
'	property			39 yrs	MM	S/L		
		Accets Blaced in	│ n Service During 2009 Ta	v Voor Using the	MM Alternative I	S/L	Syctom	
20.4	Class life	Assets Placed II	n Service During 2009 17	ax rear Using the	Alternative	S/L	system	<u> </u>
				12 2223		S/L		
	12-year : 40-year			12 yrs 40 yrs	MM	S/L S/L		
	t IV Summary (See ins	structions)		40 ATR	PIPI	Б/Ц		
	Listed property. Enter amou					21		
	Total . Add amounts from line 12, I the appropriate lines of your return							17,267.
	For assets shown above an	d placed in servic	ce during the current yea	r, enter	23			1//20/•
	the portion of the basis attri	PAIGNIE 10 2601101	11 ZUUM CUSIS		LJ			

Total. Add amounts in column (f). See the instructions for where to report

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.

	COIGITITIS	(a) through (c)	or occilor A,	an or occ	.поп в, а	ina occ	1011 0 11	арріп	abic.						
		n A — Deprecia			•		_	-						Ť	
24 a	Do you have eviden	ce to support the bu	usiness/investmer	nt use claim	ed?		Yes	l N	lo 24b If	'Yes,' is the	e evidence	written? .		Yes	No
Ту	(a) pe of property (list vehicles first)	(b) Date placed in service	Business/ investment use percentage	(d) Cost other b	or	(busine	(e) or deprecia ss/investn se only)	ation nent	(f) Recovery period	Me	(g) ethod/ evention	Depr	(h) eciation luction	Ele secti	(i) ected on 179 cost
25	Special depreci	iation allowance n 50% in a quali									25				
26	Property used r	more than 50%	in a qualified	business	use:	•									
	-														
27	Property used 5	0% or less in a	qualified busi	iness use:								T			
												<u> </u>		_	
	Add amounts in	. , .	•					•							
_29	Add amounts in	column (i), line	e 26. Enter he										29		
Com	plata this saction	a for vohiolos us	and by a calar	Section						r! or rola	tad nar	son If w	ou provid	dad vahi	oloc
	plete this sectior our employees, fi														CICS
			1		a)		o)		(c)	1	d)		e)	(1	<u> </u>
30	Total business/				icle 1		cle 2	Ve	ehicle 3	1	cle 4		cle 5	Vehic	
		(do not include es)													-
31	Total commuting m	niles driven during th	he year												
32	Total other pers	sonal (noncomm													
33	Total miles driv		ear. Add												
	iiiles 50 tiilougi	11 52		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
34	Was the vehicle during off-duty	e available for p hours?													
35	Was the vehicle		by a more												
36	Is another vehic personal use?	cle available for													
		Section	C – Question	s for Emp	oloyers V	Vho Pro	vide Ve	hicles	for Use	by Their	Employ	ees			
Ansv 5% (ver these questic owners or related	ons to determine d persons (see i	e if you meet anstructions).	an excepti	on to co	mpleting	g Sectio	n B fo	r vehicles	used by	employ	ees who	are no	t more th	han
37	Do you maintain	n a written polic ees?						ehicles	s, includir	ng comm	uting,			Yes	No
38	Do you maintain employees? Se	n a written polic	y statement the	nat prohib used by	its perso	nal use e officer	of vehics, direc	cles, e	xcept cor	nmuting, nore own	by your	r 			
39	Do you treat all														
40	Do you provide vehicles, and re	more than five	vehicles to yo	ur employ	ees, obt	ain infoi	mation	from y	our empl	oyees at	oout the	use of t	he		
41	Do you meet the Note: <i>If your ar</i>	e requirements	concerning qu	alified au	tomobile	demon	stration	use?	(See insti	ructions.))				
Par	-		55, 4 0, 01 4 1	15 153, 6	101 60	inpicie	CCCIOII	וטו ע	inc cover	Ca VEIIIC					
ı aı	t VI Allioiti	(a)			(b)		(c)			(d)		(e)		(f)	
	Des	cription of costs		Date an	nortization egins		Amortizab amount		C	Code ection	Amo	ortization riod or centage	, f	mortization or this year	n r
42	Amortization of	costs that begin	ns during your	2009 tax	year (se	ee instru	ictions):	:					<u> </u>		
43	Amortization of	f costs that bega	an before you	r 2009 tax	vear				1		1	43			
					,										

44

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

Line 11 Stmt

Other income:	Rev/Exp Book	Net Inv Inc	Adj Net Inc
1/4 of 481(a) adj			
recognized ratably			
over 4 years; Form			
3115 filed in 2006	9,422.		

Total 9,422.

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
Insurance	1,305.			1,305.
Postage & Delivery	1,313.			1,313.
Noncapitalized				
Equip/software	2,918.			2,918.
Telephone, fax & internet	3,460.			3,460.
Program supplies	1,147.			1,147.
Office Supplies & Exp	4,320.	21.		4,299.
Technology Supplies	2,656.			2,656.
Rounding	-1.			-1.

Total <u>17,118.</u> <u>21.</u> <u>17,097.</u>

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

Other Decreases Stmt

481(a) adjustment for change to accrual	
accounting in 2006, all of which	
was recognized for book purposes	
in 2006, but is being recognized	
for tax purposes ratably over 4	
years. See Part 1, Line 11. Form	
3115 filed in 2006.	9,422.
Unrealized loss in 2009 for book purposes on	
investments carried at market value	
for GAAP, not recognized for tax	
purposes	413.
Total	0.035

Form 990-PF, Page 6, Part VIII, Line 1 Information about Officers, Directors, Trustees, Etc.

Niven Postma P.O. Box 618 Yonkers NY 10705 O.25 O.	(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
P.O. Box 618	Person X Business				
Yonkers NY 10705 0.25 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	Niven Postma				
Person X Business Nancy Muirhead P.O. Box 618 Board Member Yonkers NY 10705 0.25 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	P.O. Box 618				
Nancy Muirhead P.O. Box 618 Board Member Yonkers NY 10705 Person X Business Board Member P.O. Box 618 Board Member O. O. O. Yonkers NY 10705 Board Member O. O. O. O. Person X Business Board Member O. O. O. O. Yonkers NY 10705 Board Member O. O. O. O. Poo. Box 618 Board Member O. O. O. O. O. Wichael Fetsko P.O. Box 618 Board Member Board Member D. O. O. O.		0.25	0.	0.	0.
P.O. Box 618 Yonkers NY 10705 Person X Business 0. Richardt Dannhauser Board Member 0. 0. P.O. Box 618 Board Member 0. 0. Yonkers NY 10705 0. 0. Person X Business 0. 0. 0. Yonkers NY 10705 3.00 0. 0. 0. Person X Business Board Member 0. 0. 0. Yonkers NY 10705 0.25 0. 0. 0. Person X Business 0. 0. 0. 0. Michael Fetsko P.O. Box 618 Board Member Board Member 0. 0. 0.	Person X Business				
Yonkers NY 10705 Person X Business Bichardt Dannhauser Board Member P.O. Box 618 Board Member Yonkers NY 10705 Person X Business Chris Boeke Board Member P.O. Box 618 Board Member Yonkers NY 10705 Person X Business Joan Sherman Board Member Yonkers NY 10705 Person X Business Michael Fetsko Board Member P.O. Box 618 Board Member	Nancy Muirhead				
Person X Business Board Member P.O. Box 618 Board Member Yonkers NY 10705 0.50 Person X Business Chris Boeke Board Member P.O. Box 618 Board Member Yonkers NY 10705 3.00 Person X Business Joan Sherman Board Member P.O. Box 618 Board Member Wichael Fetsko Board Member P.O. Box 618 Board Member		Board Member			
Richardt Dannhauser P.O. Box 618 Board Member Yonkers NY 10705 0.50 0.0.0.0. Person X Business Board Member Yonkers NY 10705 3.00 0.0.0.0. Person X Business Board Member Yonkers NY 10705 0.25 0.0.0.0. Person X Business Board Member Michael Fetsko Board Member Board Member P.O. Box 618 Board Member		0.25	0.	0.	0.
P.O. Box 618 Yonkers NY 10705 Person X Business Chris Boeke Board Member P.O. Box 618 Board Member Yonkers NY 10705 Person X Business Joan Sherman Board Member P.O. Box 618 Board Member Yonkers NY 10705 Person X Business Michael Fetsko Board Member P.O. Box 618 Board Member	Person X Business				
Yonkers NY 10705 0.50 0.0. <	Richardt Dannhauser				
Person X Business Chris Boeke P.O. Box 618 Board Member Yonkers NY 10705 Person X Business Board Member Yonkers NY 10705 0.25 0.0.0.0. Person X Business Board Member Board Member Board Member Board Member	P.O. Box 618	Board Member			
Chris Boeke P.O. Box 618 Board Member Yonkers NY 10705 3.00 0. 0. 0. 0. 0. Person X Business Board Member 0. 25 0. 0. 0. Person X Business Michael Fetsko Board Member P.O. Box 618 Board Member Board Member	Yonkers NY 10705	0.50	0.	0.	0.
P.O. Box 618 Yonkers NY 10705 Person X Business Joan Sherman Board Member P.O. Box 618 Board Member Yonkers NY 10705 Person X Business Michael Fetsko Board Member P.O. Box 618 Board Member	Person X Business				
Yonkers NY 10705 3.00 0. 0. 0. Person X Business Board Member Board Member 0. <td>Chris Boeke</td> <td></td> <td></td> <td></td> <td></td>	Chris Boeke				
Person X Business Joan Sherman P.O. Box 618 Board Member Yonkers NY 10705 0.25 0.0.0 Person X Business Michael Fetsko Board Member Board Member	P.O. Box 618	Board Member			
Joan Sherman P.O. Box 618 Board Member Yonkers NY 10705 0.25 0. 0. 0. Person X Business Business Board Member Michael Fetsko Board Member	Yonkers NY 10705	3.00	0.	0.	0.
P.O. Box 618 Board Member Yonkers NY 10705 0.25 0. 0. 0. Person X Business Board Member Board Member Board Member	Person X Business				
Yonkers NY 10705 0.25 0. 0. 0. Person X Business Business Business Board Member Board Member Board Member	Joan Sherman				
Michael Fetsko P.O. Box 618 Board Member	P.O. Box 618	Board Member			
Michael Fetsko P.O. Box 618 Board Member	Yonkers NY 10705	0.25	0.	0.	0.
P.O. Box 618 Board Member	Person X Business				
	Michael Fetsko				
Yonkers NV 10705 0 25 0 0	P.O. Box 618	Board Member			
1011ACLD 41 10703 0.23 0. 0.	Yonkers NY 10705	0.25	0.	0.	0.

0.	0.	0.

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

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Dan Farrell, CPA Intuit	Review Report Payroll Processing	4,860.			4,860.

Total	5,658.	5,658.

Form 990-PF, Page 1, Part I

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Michael Holmstrom	Technology Svcs	7,766.			7,766.
Marita Oosthuizen	SA Prog Coord	11,149.			11,149.
Zoleka Petse	SA Prog Coord	17,804.			17,804.
Yanibo Consulting	SA Prog Coord	9,513.			9,513.
Micaiah Rucker	Graphic Design	30.			30.
Owen Lampe	Technology Svcs	3,175.			3,175.
Paul Hancock	Technology Svcs	300.			300.
C.O.W. IT	Computer Maint	56.			56.
National Mentoring	Background Checks	644.			644.
Lexis/Nexis Screen	Background Checks	162.			162.
R. Rogers & Assoc	Fundraising	5,000.			5,000.
Wendy Satin	Operations	1,120.			1,120.
Dalcy Flaquer	Consulting	344.			344.

Total <u>57,063.</u> <u>57,063.</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	1250	SL	5.00	500		_
Projector	12/30/05	801	560	SL	5.00	161		
Laptop	12/30/05	695	487	SL	5.00	139		
Adobe Platform Software	06/26/07	22491	11246	SL	3.00	7497		
HP Laptop	04/03/07	1169	351	SL	5.00	234		
SA Servers	08/08/08	3766	377	SL	5.00	753		
Platform	06/15/08	20594	3432	SL	3.00	6865		
Platform Hdwe	06/12/09	4906		SL	3.00	818		
Website	10/27/09	3000		SL	5.00	300		

Total

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

L-10b Stmt

	End of Year			
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value		
72 Shares Old National Bancorp	895.	895.		
Total	895.	895.		

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

L-14 Stmt

Line 14b - Description of Land, Buildings, and Equipment	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value
Office Equipment	2,665.	1,931.	734.
Website construction	5,500.	2,050.	3,450.
Communication Platform Equipment			
and software	51,757.	30,987.	20,770.
Total	59,922.	34,968.	24,954.