

Form **990-PF**

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

OMB No 1545-0052

**2008**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 2008, or tax year beginning 12/01/08, and ending 11/30/09

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

Use the IRS  
label.  
Otherwise,  
print  
or type.  
See Specific  
Instructions.

Name of foundation

The Reuben E. Thalberg Foundation

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

P.O. Box 272

Room/suite

City or town, state, and ZIP code

Southington

CT 06489

A Employer identification number

06-6034447

B Telephone number (see page 10 of the instructions)

860-628-6704

C If exemption application is pending, check here ☐D 1. Foreign organizations, check here ☐

2. Foreign organizations meeting the

85% test, check here and attach computation ☐E If private foundation status was terminated  
under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination  
under section 507(b)(1)(B), check here ☐H Check type of organization ☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundationI Fair market value of all assets at end  
of year (from Part II, col (c),  
line 16) ▶ \$

334,998

J Accounting method ☐ Cash ☒ Accrual  
☐ Other (specify)

(Part I, column (d) must be on cash basis)

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

(a) Revenue and  
expenses per  
books(b) Net investment  
income(c) Adjusted net  
income(d) Disbursements  
for charitable  
purposes  
(cash basis only)

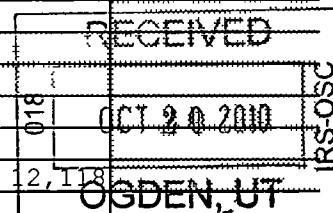
SCANNED OCT 26 2010

Revenue

- 1 Contributions, gifts, grants, etc., received (attach schedule)
- 2 Check ☒ if the foundation is not required to attach Sch B
- 3 Interest on savings and temporary cash investments
- 4 Dividends and interest from securities
- 5a Gross rents
- b Net rental income or (loss)
- 6a Net gain or (loss) from sale of assets not on line 10
- b Gross sales price for all assets on line 6a
- 7 Capital gain net income (from Part IV, line 2)
- 8 Net short-term capital gain
- 9 Income modifications
- 10a Gross sales less returns & allowances
- b Less Cost of goods sold
- c Gross profit or (loss) (attach schedule)
- 11 Other income (attach schedule)
- 12 Total. Add lines 1 through 11

Operating and Administrative Expenses

- 13 Compensation of officers, directors, trustees, etc
- 14 Other employee salaries and wages
- 15 Pension plans, employee benefits
- 16a Legal fees (attach schedule)
- b Accounting fees (attach schedule) Stmt 1
- c Other professional fees (attach schedule)
- 17 Interest
- 18 Taxes (attach schedule) (see page 14 of the instructions) Stmt 2
- 19 Depreciation (attach schedule) and depletion
- 20 Occupancy
- 21 Travel, conferences, and meetings
- 22 Printing and publications
- 23 Other expenses (att sch) Stmt 3
- 24 Total operating and administrative expenses.  
Add lines 13 through 23
- 25 Contributions, gifts, grants paid
- 26 Total expenses and disbursements. Add lines 24 and 25
- 27 Subtract line 26 from line 12
- a Excess of revenue over expenses & disbursements
- b Net investment income (if negative, enter -0-)
- c Adjusted net income (if negative, enter -0-)



For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

Form 990-PF (2008)

DAA

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**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
<b>Assets</b>	1 Cash—non-interest-bearing	12,326	18,161	18,161
	2 Savings and temporary cash investments	228,871	194,674	194,674
	3 Accounts receivable ▶ Less allowance for doubtful accounts ▶			
	4 Pledges receivable ▶ Less allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions)			
	7 Other notes and loans receivable (att. schedule) ▶ Less allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges		560	560
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule) See Stmt 4	37,011	37,011	121,603
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ Less accumulated depreciation (attach sch.) ▶			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment basis ▶ Less accumulated depreciation (attach sch.) ▶			
	15 Other assets (describe ▶ )			
	16 <b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	278,208	250,406	334,998
<b>Liabilities</b>	17 Accounts payable and accrued expenses			
	18 Grants payable	3,000		
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ See Statement 5 )	513		
	23 <b>Total liabilities</b> (add lines 17 through 22)	3,513	0	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/></b> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	<b>Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/></b> <b>and complete lines 27 through 31.</b>			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg, and equipment fund	186,842		
	29 Retained earnings, accumulated income, endowment, or other funds	87,853	250,406	
	30 <b>Total net assets or fund balances</b> (see page 17 of the instructions)	274,695	250,406	
	31 <b>Total liabilities and net assets/fund balances</b> (see page 17 of the instructions)	278,208	250,406	

**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	274,695
2 Enter amount from Part I, line 27a	2	7,511
3 Other increases not included in line 2 (itemize) ▶	3	
4 Add lines 1, 2, and 3	4	282,206
5 Decreases not included in line 2 (itemize) ▶ See Statement 6	5	31,800
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	250,406

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

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a N/A			
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			
b			
c			
d			
e			

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div style="border: 1px solid black; padding: 2px;">           If gain, also enter in Part I, line 7            If (loss), enter -0- in Part I, line 7         </div>	2	
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 pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8		3	

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

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

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

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2007	19,240	382,463	0.050306
2006	16,427	387,215	0.042423
2005	9,859	347,531	0.028369
2004	17,141	335,181	0.051140
2003	14,570	327,985	0.044423

2 Total of line 1, column (d)	2	0.216661
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	0.043332
4 Enter the net value of noncharitable-use assets for 2008 from Part X, line 5	4	227,017
5 Multiply line 4 by line 3	5	9,837
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	88
7 Add lines 5 and 6	7	9,925
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18.	8	38,157

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

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling letter (attach copy of ruling letter if necessary—see instructions)		
<b>b</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	88
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
<b>3</b>	Add lines 1 and 2	3	88
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-	5	88
<b>6</b>	<b>Credits/Payments</b>		
<b>a</b>	2008 estimated tax payments and 2007 overpayment credited to 2008	6a	560
<b>b</b>	Exempt foreign organizations—tax withheld at source	6b	63
<b>c</b>	Tax paid with application for extension of time to file (Form 8868)	6c	
<b>d</b>	Backup withholding erroneously withheld	6d	
<b>7</b>	Total credits and payments. Add lines 6a through 6d	7	623
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	9	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	10	535
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2009 estimated tax</b> <input type="checkbox"/> 0 <b>Refunded</b> <input type="checkbox"/>	11	535

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year?		X
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?		
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	X	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) <input type="checkbox"/> None		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV		X
<b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

N/A

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

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	X	
14	The books are in care of ► Genevieve B. Thalberg, CPA 32 North Main St Located at ► Southington, CT	Telephone no ► 860-628-6704 ZIP+4 ► 06489-0272		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year	► 15		

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2)	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
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(5)	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
(6)	Agree to pay money or property to a government official? (Exception. 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	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here	N/A ► <input type="checkbox"/>	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2008?	N/A	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2008? If "Yes," list the years ► 20 , 20 , 20 , 20	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see page 20 of the instructions )	N/A	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20 , 20 , 20 , 20		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If "Yes," did it have excess business holdings in 2008 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2008 )	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
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 2008?	4b	X

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

<b>5a</b> 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))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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 page 22 of the instructions)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</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 page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>5b</b>		X
<b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d)	N/A <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</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	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>6b</b>		X
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b> If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	<b>7b</b>		

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

<b>1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).</b>				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Statement 7				
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE."</b>				
(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				
<b>Total number of other employees paid over \$50,000</b>				

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)****3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE."**

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

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

**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 N/A

2

3

4

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

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

Amount

1 N/A

2

All other program-related investments. See page 24 of the instructions

3

Total. Add lines 1 through 3



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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	211,773
<b>b</b>	Average of monthly cash balances	<b>1b</b>	15,244
<b>c</b>	Fair market value of all other assets (see page 24 of the instructions)	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c)	<b>1d</b>	227,017
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	227,017
<b>4</b>	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see page 25 of the instructions) <span style="float: right;">See Statement 8</span>	<b>4</b>	0
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	227,017
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	11,351

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

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	11,351
<b>2a</b>	Tax on investment income for 2008 from Part VI, line 5	<b>2a</b>	88
<b>b</b>	Income tax for 2008 (This does not include the tax from Part VI.)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	88
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	11,263
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	
<b>5</b>	Add lines 3 and 4	<b>5</b>	11,263
<b>6</b>	Deduction from distributable amount (see page 25 of the instructions)	<b>6</b>	
<b>7</b>	<b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	11,263

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

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	<b>1a</b>	38,157
<b>b</b>	Program-related investments—total from Part IX-B	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	38,157
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see page 26 of the instructions)	<b>5</b>	88
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	<b>6</b>	38,069

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



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

	(a) Corpus	(b) Years prior to 2007	(c) 2007	(d) 2008
1 Distributable amount for 2008 from Part XI, line 7				11,263
2 Undistributed income, if any, as of the end of 2007				
a Enter amount for 2007 only				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2008				
a From 2003				
b From 2004				
c From 2005				
d From 2006				
e From 2007				
f Total of lines 3a through e				
4 Qualifying distributions for 2008 from Part XII, line 4 ▶ \$ 38,157				
a Applied to 2007, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see page 26 of the instructions)				
c Treated as distributions out of corpus (Election required—see page 26 of the instructions)				
d Applied to 2008 distributable amount				11,263
e Remaining amount distributed out of corpus	26,894			
5 Excess distributions carryover applied to 2008 (If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	26,894			
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions				
e Undistributed income for 2007 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions				
f Undistributed income for 2008 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2009				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)				
8 Excess distributions carryover from 2003 not applied on line 5 or line 7 (see page 27 of the instructions)				
9 Excess distributions carryover to 2009. Subtract lines 7 and 8 from line 6a	26,894			
10 Analysis of line 9				
a Excess from 2004				
b Excess from 2005				
c Excess from 2006				
d Excess from 2007				
e Excess from 2008	26,894			

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

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2008, 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	Prior 3 years			(e) Total
	(a) 2008	(b) 2007	(c) 2006	(d) 2005	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
<b>b</b> 85% of line 2a					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see page 27 of the instructions.)**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

N/A

**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

N/A

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

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

**a** The name, address, and telephone number of the person to whom applications should be addressed

Genevieve B. Thalberg, CPA  
P.O. Box 272, Southington, CT 06489

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

SEE APPLICATION ATTACHED

**c** Any submission deadlines

March 31st

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

See Statement 9

**Part XV . Supplementary Information (continued)****3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> Paid during the year Brandeis University  Southern CT Hebrew Academ  Yale-New Haven Hospital  Ithaca College fbo-Jessica Crispino  Penn. State University fbo-Marissa Champan  Quinnipiac University fbo-Melissa Hastie  Central CT St University fbo-Amanda Golec	Donation  Donation  Donation  Scholarship  Scholarship  Scholarship  Scholarship	7/13/09  7/13/09  11/23/09  12/03/08  11/17/09  11/17/09  11/24/09		1,000  1,000  25,000  3,000  1,800  2,500  500
<b>Total</b>			▶ <b>3a</b>	34,800
<b>b</b> Approved for future payment See Statement 10				30,700
<b>Total</b>			▶ <b>3b</b>	30,700

Enter gross amounts unless otherwise indicated

(See worksheet in line 13 instructions on page 28 to verify calculations )

---

N/A

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

- 1** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
- a** Transfers from the reporting foundation to a noncharitable exempt organization of
- (1)** Cash
  - (2)** Other assets
- b** Other transactions
- (1)** Sales of assets to a noncharitable exempt organization
  - (2)** Purchases of assets from a noncharitable exempt organization
  - (3)** Rental of facilities, equipment, or other assets
  - (4)** Reimbursement arrangements
  - (5)** Loans or loan guarantees
  - (6)** Performance of services or membership or fundraising solicitations
- c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees
- d** If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

	Yes	No
1a(1)		X
1a(2)		X
1b(1)		X
1b(2)		X
1b(3)		X
1b(4)		X
1b(5)		X
1b(6)		X
1c		X

[illegible]

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

☐ Yes ☒ No

- b If "Yes," complete the following schedule**

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

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

Signature of officer or trustee

Date: \_\_\_\_\_

Title

**Sign Here**

**Paid  
Preparer's  
Use Only**

Preparer's  
signature

Firm's name (or yours if self-employed), address and ZIP code

Ralph V. Ingriselli, CPA  
160 Main Street  
Southington, CT 06489

Date \_\_\_\_\_

10/15/10

Check if  
self-emp

Preparer's identifying

number (see **Signature** on  
page 30 of the instructions)

041-48-3345

EIN ▶ 06-1179650

Phone no 860-628-9696

Form **990-PF** (2008)

## Federal Statements

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

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Accounting Services	\$ 2,707	\$ 2,707	\$ 2,707	\$ 2,707
Total	\$ 2,707	\$ 2,707	\$ 2,707	\$ 2,707

### Statement 2 - Form 990-PF, Part I, Line 18 - Taxes

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Foreign Tax Paid	\$ 63	\$ 63	\$ 63	\$ 63
Total	\$ 63	\$ 63	\$ 63	\$ 63

### Statement 3 - Form 990-PF, Part I, Line 23 - Other Expenses

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Expenses				
Legal Notice	34	34	34	34
Annual Report	50	50	50	50
Investment Fees	8	8	8	8
Dues & Subscriptions	495	495	495	495
Total	\$ 587	\$ 587	\$ 587	\$ 587

**Statement 4 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>	<u>Basis of Valuation</u>	<u>Fair Market Value</u>
282 shs Verizon	\$ 2,599	\$ 2,599	Cost	\$ 8,872
280 shs Connecticut Water Service	1,647	1,647	Cost	6,356
14 shs Idearc, Inc.	99	99	Cost	
202 shs Comcast Corp.	1,493	1,493	Cost	2,961
49 shs Alcatel	796	796	Cost	163
141 shs Quest Communications, Inc.	718	718	Cost	515
1354 shs NSTAR	5,667	5,667	Cost	44,858
192 shs IBEROLA	9,873	9,873	Cost	7,287
175 shs Vodafone	284	284	Cost	3,971
24 shs NCR	57	57	Cost	226
24 shs Teradata	63	63	Cost	703
800 shs PEPCO Holdings, Inc.	7,647	7,647	Cost	13,040
64 shs A T & T, Inc.	895	895	Cost	4,822
671 shs A T & T, Inc.	3,356	3,356	Cost	10,667
477shs A T & T, Inc.	1,805	1,805	Cost	7,430
5 shs FairPoint Communication, Inc	12	12	Cost	9,732
Total	\$ <u>37,011</u>	\$ <u>37,011</u>		\$ <u>121,603</u>

**Statement 5 - Form 990-PF, Part II, Line 22 - Other Liabilities**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
Federal Excise Taxes Payable	\$ 513	\$
Total	\$ <u>513</u>	\$ <u>0</u>

**Statement 6 - Form 990-PF, Part III, Line 5 - Other Decreases**

Description	Amount
Scholarships Paid	\$ 31,800
Total	\$ 31,800



7411 The Reuben E. Thalberg Foundation

06-6034447

FYE: 11/30/2009

**Federal Statements****Statement 7 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc.**

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
Genevieve B. Thalberg 61 Panorama Drive, Southington, CT 06489	Sec/Treas	0	250	0	0
Joseph M. Angelillo 475 Meriden Ave., Southington, CT 06489	Trustee	0	250	0	0
Nadine M. Britton 72 Hillside Ave., Plantville, CT 06479	Trustee	0	250	0	0
* Ralph V. Ingriselli 50 River View Court Cheshire, CT 06410	Trustee	0	250	0	0
L. Stewart Bohan 225 Acorn Drive Middletown, CT 06457	Trustee	0	250	0	0
-		0	0	0	0
-		0	0	0	0
* In addition to the above the		0	0	0	0
Trustee Ralph V. Ingriselli received		0	0	0	0
\$2,707 payment for accounting and		0	0	0	0
tax services during the current year		0	0	0	0

7411 The Reuben E. Thalberg Foundation

06-6034447

## Federal Statements

FYE: 11/30/2009

### Statement 8 - Form 990-PF, Part X, Line 4 - Cash Deemed Held - Greater Amount Explanation

<u>Description</u>	<u>Amount</u>
Scholarships Awarded and Due along with Expenses	<u>0</u>
Total	<u><u>0</u></u>

**Form 990-PF, Part XV, Line 2b - Application Format and Required Contents**

Description

SEE APPLICATION ATTACHED

**Form 990-PF, Part XV, Line 2c - Submission Deadlines**

Description

March 31st

**Statement 9 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations**

Description

Scholarships are awarded to students of Southington High School. Also, awards have been made to local students attending private secondary schools and to prior awardees during their college years. Donations are made to qualifying charities.

7411 The Reuben E. Thalberg Foundation

06-6034447

FYE: 11/30/2009

## Federal Statements

### Statement 10 - Form 990-PF, Part XV, Line 3b - Grants and Contributions Approved for Future Pmt

Name	Address	Relationship	Status	Purpose	Amount
Brandeis University		Donation			1,000
Southern CT Hebrew Academ		Donation			1,000
Yale-New Haven Hospital		Donation			25,000
Kristen Murphy		Scholarship			1,200
Rabea Hamed		Scholarship			2,500
Total					<u>30,700</u>

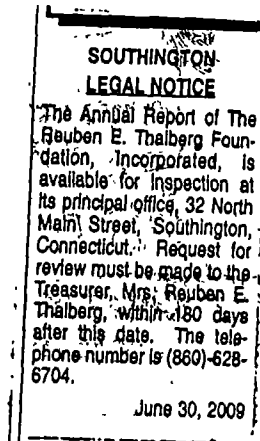
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## AFFIDAVIT OF PUBLICATION

THIS IS TO CERTIFY that the attached clipping is a true copy of a notice published in the  
RECORD-JOURNAL JULY 3, 2009.



The Record-Journal Publishing Company


State of Connecticut

} SS. Meriden

County of New Haven r

  
Pam Adamski, Office Manager

The foregoing affidavit was signed and sworn  
before me this 10, day  
of JULY 2009.

  
Angela Grabiec  
Notary Public  
My Commission Expires June 30, 2013

# **THE REUBEN THALBERG FOUNDATION, INCORPORATED**

**32 N. MAIN STREET, P.O. Box 272  
SOUTHINGTON, CONN. 06489**

**Established in 1954**

**by**

**Dr. Reuben E. Thalberg**

## **Scholarship Application**

**This application must be returned to the Foundation no later than April 17, 20  
application will not be considered.**

**An incomplete**

**The Reuben E. Thalberg Foundation  
P.O. Box 272,  
Southington, CT 06489**

## Scholarshi

(Please Type of Print)

Student's full name \_\_\_\_\_

Student's address \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Date and place of birth \_\_\_\_\_

Senior High School \_\_\_\_\_ Address of Senior High School \_\_\_\_\_

1. Expected Number in Rank in  
Graduating date \_\_\_\_\_ Graduating Class \_\_\_\_\_ Class \_\_\_\_\_

Scores in CEEB Scholastic Aptitude Test or in American College Test \_\_\_\_\_

Scholastic Average \_\_\_\_\_

2. Honors and Awards (please list chronologically and give dates received):

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3. Participation in extra-curricular activities, class, and school organizations (offices held, awards, etc.) (please list chronologically and give dates):

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4. Personal and civic activities conducted out of school (offices held, awards, etc.) (please list chronologically and give dates):

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5. Employment (please list periods of employment chronologically, giving dates, and showing average time employed each week during such periods):

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6. Miscellaneous — other activities such as special interests, hobbies, or additional information relevant to activities; plans for college or university study — please identify here the major academic interests which you will pursue at the college or university level. If possible, indicate what your plans are for a career.

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# pplication

7. Please list other scholarships applied for, and identify those which you have already been awarded:

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Colleges or institutions applied to:

Accepted

Rejected

Have not  
heard

1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____

Which is your first choice? \_\_\_\_\_ Second choice? \_\_\_\_\_

Prospective Major \_\_\_\_\_ Course duration \_\_\_\_\_

10. Educational History: The applicants should describe briefly and in narrative form on a separate sheet of paper not to exceed 200 words the development of his or her educational interests from the time of entry to high school until the date of this application. Here the applicant should identify subjects of special interest, scholastic achievements, and other qualifications which might bear upon this particular award.

11. List number of children in household.

12. List names and ages of children in household.

13. List financial obligations (tuition, fees, room & board) now being incurred for other members of the family.

14. Educational status of children at time of application.

\_\_\_\_\_  
(Signature of Applicant)

One recent black and white photo must accompany this application, (not a snapshot).

The information submitted on this form and attached hereto has been examined by me, and I hereby certify that the facts therein are true

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of Principal)



### PART I

#### STUDENT'S PROPOSED BUDGET (list on an annual basis)

##### Resources

Savings \$ \_\_\_\_\_  
Summer Earnings \$ \_\_\_\_\_  
Earnings during year \$ \_\_\_\_\_  
Veteran's benefits \$ \_\_\_\_\_  
Aid from parents \$ \_\_\_\_\_  
Aid from other sources (loans,  
grants, scholarships, etc.) \$ \_\_\_\_\_  
Other (specify) \$ \_\_\_\_\_  
Total Resources \$ \_\_\_\_\_  
If you own an automobile,  
give year and make \_\_\_\_\_

##### Cost

Tuition and fees \$ \_\_\_\_\_  
Books and Equipment \$ \_\_\_\_\_  
Board \$ \_\_\_\_\_  
Room \$ \_\_\_\_\_  
Clothing \$ \_\_\_\_\_  
Food \$ \_\_\_\_\_  
Personal recreation \$ \_\_\_\_\_  
Other (specify) \$ \_\_\_\_\_  
Total Costs \$ \_\_\_\_\_  
Amount of indebtedness on  
automobile \$ \_\_\_\_\_

Other indebtedness \_\_\_\_\_  
(specify)

Explain any unusual circumstances connected with any of the above items: \_\_\_\_\_

### PART II

#### TO BE FILLED IN BY PARENTS OR GUARDIANS

##### Father (or Guardian)

##### Mother (Maiden Name)

Name \_\_\_\_\_

Name \_\_\_\_\_

Home Address \_\_\_\_\_

Home Address \_\_\_\_\_

(City) (Zone) (State)

(City) (Zone) (State)

Employer or Firm \_\_\_\_\_

Employer or Firm \_\_\_\_\_

Kind of Business \_\_\_\_\_

Kind of Business \_\_\_\_\_

Position \_\_\_\_\_ Yrs. in Firm \_\_\_\_\_

Position \_\_\_\_\_ Yrs. in Firm \_\_\_\_\_

Annual Salary (before taxes) \$ \_\_\_\_\_

\$ \_\_\_\_\_

Other Income \$ \_\_\_\_\_

\$ \_\_\_\_\_

Explain any extraordinary expenses or indebtedness: \_\_\_\_\_

Applicant must attach three letters of recommendation. Two from teachers and one from an individual other than a teacher. Transcript must accompany application.